

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000005968

**Entity Name:** METROPOLITAN ITALIAN AGENCY, LLC

**Current Principal Place of Business:**

20385 BISCAYNE BLVD.  
AVENTURA, FL 33180

**Current Mailing Address:**

20385 BISCAYNE BLVD.  
AVENTURA, FL 33180

**FEI Number: 26-3542460**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MURPHY, MARK E  
20385 BISCAYNE BLVD.  
AVENTURA, FL 33180 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MARK & SANDY MURPHY W/TENANTS BY ENTIRETY  
Address 20385 BISCAYNE BLVD.  
City-State-Zip: AVENTURA FL 33180

Title MGRM  
Name ROUCO, REYNALDO  
Address 20385 BISCAYNE BLVD.  
City-State-Zip: AVENTURA FL 33180

Title MGRM  
Name WAINER, JAVIER  
Address 20385 BISCAYNE BLVD.  
City-State-Zip: AVENTURA FL 33180

Title MGRM  
Name ARIEL & LUZ WAINER W/TENANTS BY ENTIRETY  
Address 20385 BISCAYNE BLVD.  
City-State-Zip: AVENTURA FL 33180

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: MARK E MURPHY**

**MGRM**

**01/25/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date