

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000013808

**Entity Name:** CONSOLACION, LLC

**Current Principal Place of Business:**

306 ALCAZAR AVE.  
SUITE 302  
CORAL GABLES, FL 33134

**Current Mailing Address:**

306 ALCAZAR AVE.  
SUITE 302  
CORAL GABLES, FL 33134

**FEI Number:** 20-7264148

**Certificate of Status Desired:** No

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

SCHWARTZ, FRANK  
169 EAST FLAGLER ST.  
SUITE 1200  
MIAMI, FL 33131 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 DANYS BAEZ DECLARATION TRUST  
DATED 1/18/07  
Address 306 ALCAZAR AVE. #302  
City-State-Zip: CORAL GABLES FL 33134

*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:** DANYS BAEZ

MGRM

02/26/2014

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date