

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000085374

**Entity Name:** EPS LOGISTICS, LLC

**Current Principal Place of Business:**

8258 N.W. 14TH STREET  
DORAL, FL 33126

**Current Mailing Address:**

PO BOX 260398  
MIAMI, FL 33126-0008

**FEI Number:** 26-0814464

**Certificate of Status Desired:** Yes

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

RODON AND ANDREU, P.L.  
201 ALHAMBRA CIRCLE  
SUITE 504  
CORAL GABLES, FL 33134 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:** ALFRED ANDREU

04/25/2014

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MENICUCCI, ANGELO  
Address ORTEGA Y GASSET, NO. 40  
City-State-Zip: SANTO DOMINGO DOMINICAN  
REPUBLIC

Title MGRM  
Name MENICUCCI, DINO  
Address ORTEGA Y GASSET, NO. 40  
City-State-Zip: SANTO DOMINGO DOMINICAN  
REPUBLIC

Title MGRM  
Name MENICUCCI, RAFAEL  
Address ORTEGA Y GASSET, NO. 40  
City-State-Zip: SANTO DOMINGO DOMINICAN  
REPUBLIC

Title MGRM  
Name MENICUCCI, LUIS REYNALDO  
Address ORTEGA Y GASSET, NO. 40  
City-State-Zip: SANTO DOMINGO DOMINICAN  
REPUBLIC

*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:** ANGELO MENICUCCI

MRGM

04/25/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date