

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000118876

**Entity Name:** PAIDOS GROUP, LLC

**Current Principal Place of Business:**

55 NE 5TH AVENUE  
SUITE 501  
BOCA RATON, FL 33432

**Current Mailing Address:**

55 NE 5TH AVENUE  
SUITE 501  
BOCA RATON, FL 33432

**FEI Number:** 06-1830592

**Certificate of Status Desired:** No

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

MONIQUE TRONCONE CPA P.A.  
55 NE 5TH AVENUE  
SUITE 501  
BOCA RATON, FL 33432 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 MGR  
Name PEDRO JOSE COLMENARES  
CASTILLO  
Address 1390 BRICKELL AVENUE, SUITE 200  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name MARIA TERESA MARANTE CASTILLO  
Address 1390 BRICKELL AVENUE, SUITE 200  
City-State-Zip: MIAMI FL 33131

*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:** PEDRO JOSE COLMENARES

MGR

04/30/2015

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

\_\_\_\_\_  
Date