### 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000015734

Entity Name: LEOVI GROUP, LLC

# **Current Principal Place of Business:**

16300 NE 19 AVE SUITE 109

N. MIAMI BEACH, FL 33160

# **Current Mailing Address:**

16300 NE 19 AVE SUITE 109 N. MIAMI BEACH, FL 33160 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

MIZRAHI, JACOBO 16300 NE 19 AVE SUITE 109 N. MIAMI BEACH FL

N. MIAMI BEACH, FL 33160 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

FILED Apr 29, 2013

**Secretary of State** 

CC8667457974

### Authorized Person(s) Detail:

Title MGRM

Name MOCHON ALFILLE, LEON
Address 16300 NE 19 AVE SUITE 109
City-State-Zip: N. MIAMI BEACH FL 33160

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.