

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000028277

**FILED**  
**Jan 08, 2014**  
**Secretary of State**  
**CC1710512748**

**Entity Name:** ART WORK PARTNERS, LLC

**Current Principal Place of Business:**

2999 NORTH POWERLINE ROAD  
POMPANO BEACH, FL 33069

**Current Mailing Address:**

2999 NORTH POWERLINE ROAD  
POMPANO BEACH, FL 33069

**FEI Number:** 90-0499461

**Certificate of Status Desired:** No

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

ROSE, MICHAEL I  
150 WEST FLAGLER STREET  
SUITE 1525  
MIAMI, FL 33130 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 LORENZO, RAFAEL  
Address 2999 NORTH POWERLINE ROAD  
City-State-Zip: POMPANO BEACH FL 33069

Title MGR  
Name TITAN STONE, LLC  
Address 2999 NORTH POWERLINE ROAD  
City-State-Zip: POMPANO BEACH FL 33069

Title MGRM  
Name PANELO, AGUSTINA  
Address 2999 NORTH POWERLINE ROAD  
City-State-Zip: POMPANO BEACH FL 33069

Title MGRM  
Name MILLAN, FELIPE  
Address 2999 NORTH POWERLINE ROAD  
City-State-Zip: POMPANO BEACH FL 33069

*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:** RAFAEL LORENZO

**MANAGER**

**01/08/2014**

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

\_\_\_\_\_  
Date