1200 NW 18 PEMBROKE	4 PLACE PINES , FL 33029 US			
FEI Number: 26-4606557			Certificate of Status Desired: No	
Name and Address of Current Registered Agent:				
MLP FINANCIA 6303 BLUE LAO SUITE 320 MIAMI, FL 3312	GOON DR			
The above named	d entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of Flor	rida.
	d entity submits this statement for the purpose of changing its regis MILTON L PEREZ	tered office or regis	tered agent, or both, in the State of Floi	rida. 11/01/2017
	-	tered office or regis	tered agent, or both, in the State of Flor	
SIGNATURE	E: MILTON L PEREZ	tered office or regis	tered agent, or both, in the State of Floi	11/01/2017
SIGNATURE	EIECTRONIC SIGNATURE OF REGISTERED Agent	tered office or regis	tered agent, or both, in the State of Flor	11/01/2017
SIGNATURE	MILTON L PEREZ     Electronic Signature of Registered Agent  Person(s) Detail :			11/01/2017
SIGNATURE Authorized	MILTON L PEREZ     Electronic Signature of Registered Agent  Person(s) Detail :     AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER	11/01/2017

**Current Principal Place of Business:** 

## F

PEMBROKE PINES , FL 33029

**Current Mailing Address:** 

DOCUMENT# L09000032302

1200 NW 184 PLACE

Entity Name: CAROFLOR LLC

## N

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: ARROYO FRANCHE JOSE A

11/01/2017 AUTHORIZED MEMBER

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Nov 01, 2017 **Secretary of State** CC3266553593

## 2017 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT