

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000036943

**Entity Name:** IBERICA FINCA RAIZ, LLC

**Current Principal Place of Business:**

18031 BISCAYNE BLVD.  
1504-3  
AVENTURA, FL 33160

**Current Mailing Address:**

18031 BISCAYNE BLVD.  
1504-3  
AVENTURA, FL 33160 US

**FEI Number:** 46-0522257

**Certificate of Status Desired:** No

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

ROJAS GUILLEN, JOHN MSR  
18031 BISCAYNE BLVD  
1504-3  
AVENTURA, 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

**Authorized Person(s) Detail :**

Title MGRM  
Name ROJAS ALVAREZ, CARLOS E  
Address 18031 BISCAYNE BLVD., #1504-3  
City-State-Zip: AVENTURA FL 33180

Title MGRM  
Name GUILLEN DE ROJAS, MARIA O  
Address 18031 BISCAYNE BLVD., #1504-3  
City-State-Zip: AVENTURA FL 33180

Title MGRM  
Name ROJAS GUILLEN, YANED M  
Address 18031 BISCAYNE BLVD., #1504-3  
City-State-Zip: AVENTURA FL 33180

Title MGRM  
Name ROJAS GUILLEN, ZULIMA N  
Address 18031 BISCAYNE BLVD., #1504-3  
City-State-Zip: AVENTURA FL 33180

Title MGRM  
Name ROJAS GUILLEN, JOHN M  
Address 18031 BISCAYNE BLVD., #1504-3  
City-State-Zip: AVENTURA FL 33180

*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:** JOHN ROJAS GUILLEN

MSR

04/23/2015

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

\_\_\_\_\_  
Date