

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000073227

**Entity Name:** SEMPER FIDELIS CAPITAL GROUP L.L.C.**Current Principal Place of Business:**24114 WAGONWHEEL CT  
EUSTIS, FL 32736**Current Mailing Address:**PO BOX 331629  
PONCE, PR 00733 PR**FEI Number:** 27-0658711**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CEBOLLERO, JORGE O  
24114 WAGONWHEEL CT  
EUSTIS, FL 32736 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	CEBOLLERO, JORGE O
Address	P O BOX 331629
City-State-Zip:	PONCE PR 00733

Title	MGRM
Name	VENEGAS, IRAIDA
Address	P O BOX 331629
City-State-Zip:	PONCE PR 00733

Title	MANAGING MEMBER
Name	CEBOLLERO, JULIANNA M
Address	24114 WAGONWHEEL CT
City-State-Zip:	EUSTIS FL 32736

Title	AUTHORIZED REPRESENTATIVE
Name	CEBOLLERO, NATALIA Y
Address	24114 WAGONWHEEL CT
City-State-Zip:	EUSTIS FL 32736

*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:** IRAIDA VENEGAS

MGRM

03/04/2016

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