Electronic Signature of Signing Authorized Person(s) Detail

## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L09000115025

Entity Name: FLIPY INVEST, C.A. LLC

#### **Current Principal Place of Business:**

10520 SW 158 CT APT 207 MIAMI, FL 33196

#### **Current Mailing Address:**

10520 SW 158 CT APT 207 MIAMI, FL 33196

## FEI Number: 27-1409151

## Name and Address of Current Registered Agent:

GONZALEZ, VIRGINIA 10520 SW 158 CT APT. 207 MIAMI, FL 33196 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

#### Authorized Person(s) Detail :

Authorized Ferson(s) Detail .			
Title	MGRM	Title	PRESIDENT
Name	FLIPY INVEST, C.A.	Name	GONZALEZ, VIRGINIA
Address	10520 SW 158 CT APT 207	Address	10520 SW 158TH CT
City-State-Zip:	MIAMI FL 33196		APT 207
		City-State-Zip:	MIAMI FL 33196

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: GONZALEZ VIRGINIA

PRESIDENT

02/28/2016

Date

FILED Feb 28, 2016 Secretary of State CC4294832769

Certificate of Status Desired: No

Date