that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RAVELO, ANDREINA

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

DIRECTOR/MNGR

04/21/2015

Electronic Signature of Signing Authorized Person(s) Detail

Authorized Person(s) Detail :

SIGNATURE: DOMINGO ALONSO

Title	DIRECTOR/MNGR	Title	MNGR
Name	RAVELO, ANDREINA	Name	ELLIS, ANDRES
Address	7363 N.W. 113TH AVE.	Address	7363 N.W. 113TH AVE.
City-State-Zip:	PARKLAND FL 33076	City-State-Zip:	PARKLAND FL 33076

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.

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000021834

Entity Name: ANDRES ELLIS, LLC

Current Principal Place of Business:

7363 N.W. 113TH AVE. PARKLAND, FL 33076

Current Mailing Address:

5805 BLUE LAGOON DR **STE 200** MIAMI, FL 33126

FEI Number: 27-2022857

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

ALONSO & GARCIA PA 5805 BLUE LAGOON DR STE 200 MIAMI, FL 33126 US

04/21/2015 Date

Certificate of Status Desired: No

Date