

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000023089

**Entity Name:** 6RM INVESTMENTS, LLC

**Current Principal Place of Business:**

770 PONCE DE LEON BLVD  
2ND FLOOR  
CORAL GABLES, FL 33134

**Current Mailing Address:**

770 PONCE DE LEON BLVD  
2ND FLOOR  
CORAL GABLES, FL 33134 US

**FEI Number:** 27-2044040

**Certificate of Status Desired:** Yes

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

MONTERO, YAMILE  
770 PONCE DE LEON BLVD  
2ND FLOOR  
CORAL GABLES, FL 33134 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 MONTERO, RICARDO J  
Address 770 PONCE DE LEON BLVD, 2ND FLOOR  
City-State-Zip: CORAL GABLES FL 33134

Title MGRM  
Name MONTERO, RICARDO R  
Address 770 PONCE DE LEON BLVD, 2ND FLOOR  
City-State-Zip: CORAL GABLES FL 33134

Title MGRM  
Name MONTERO, YAMILE  
Address 770 PONCE DE LEON BLVD, 2ND FLOOR  
City-State-Zip: CORAL GABLES FL 33134

*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:** YAMILE MONTERO

MGRM

02/19/2015

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

\_\_\_\_\_  
Date