

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000037160

**Entity Name:** FAMI-0206, LLC

**Current Principal Place of Business:**

808 NE. 214 LN.  
2  
NORTH MIAMI BEACH, FL 33179

**Current Mailing Address:**

808 NE. 214 LN.  
2  
NORTH MIAMI BEACH, FL 33179

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

ALICIA BENITEZ CPA LLC  
11877 SW 38 TERR  
MIAMI, FL 33175 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 NICO, FRANCISCO  
Address 21383 NE. 8 CT. # 3  
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title MGRM  
Name VENTURINI, ANDREA  
Address 21383 NE. 8 CT. # 3  
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title MGR  
Name NICO, SOFIA  
Address 21383 NE 8TH CT NO 3  
City-State-Zip: MIAMI FL 33179

Title MGRM  
Name CAPIRONE, ENRIQUE A  
Address 808 NE. 214 LN. # 2  
City-State-Zip: NORTH MIAMI BEACH FL 33179

*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:** ENRIQUE A. CAPIRONE

**MANAGER**

**01/13/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date