| SUNNY ISLES | S, FL 33160 | | | |
|---|--|-----------------------|--|----------------------|
| FEI Number: 80-0600181 | | | Certificate of Status Desired: No | |
| Name and Ad | Idress of Current Registered Agent: | | | |
| SHEMESH, MAR 19610 NE 26 AVE | ENUE | | | |
| MIAMI, FL 33180 | | | | |
| , | entity submits this statement for the purpose of changing its regis | tered office or regis | stered agent, or both, in the State of Flo | orida. |
| The above named e | | tered office or regis | stered agent, or both, in the State of Flo | orida. 03/20/2018 |
| The above named e | entity submits this statement for the purpose of changing its regis | tered office or regis | stered agent, or both, in the State of Flo | |
| The above named e | entity submits this statement for the purpose of changing its regis MARIA SHEMESH | tered office or regis | stered agent, or both, in the State of Flo | 03/20/2018 |
| The above named e SIGNATURE: Authorized P | entity submits this statement for the purpose of changing its regis MARIA SHEMESH Electronic Signature of Registered Agent | tered office or regis | stered agent, or both, in the State of Fla | 03/20/2018 |

Address

City-State-Zip:

Current Principal Place of Business: 150 SUNNY ISLES BLVD., TOWER 1 UNIT 906 SUNNY ISLES. FL 33160

Current Mailing Address:

DOCUMENT# L10000053946

150 SUNNY ISLES BLVD., TOWER 1 UNIT 906 SUNNY ISLES EL 33160

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: MARTINS & DAVIS INTERNATIONAL, LLC

FEI

Nam

150 SUNNY ISLES BLVD., TOWER 1

SUNNY ISLES FL 33160

UNIT 906

Address

City-State-Zip:

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: FRAGA DARCI M

Electronic Signature of Signing Authorized Person(s) Detail

MGRM

03/20/2018

FILED Mar 20, 2018 Secretary of State CC6449557604

Date

150 SUNNY ISLES BLVD., TOWER 1

SUNNY ISLES FL 33160

UNIT 906