## 2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L10000070647

Entity Name: HERMANOS CAFFARO, LLC

**Current Principal Place of Business:** 

1805 PONCE DE LEON BLVD SUITE 400

CORAL GABLES, FL 33134

**Current Mailing Address:** 

1805 PONCE DE LEON BLVD SUITE 400

CORAL GABLES, FL 33134 US

FEI Number: 90-0601190 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JLG CORPORATE SERVICES INC. 1805 PONCE DE LEON BLVD SUITE 400 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: JORGE L. GURIAN. ESQ. 04/28/2017

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGR Title MGR

Name CAFFARO, HORACIO A Name CAFFARO, GUIDO M

Address 1805 PONCE DE LEON BLVD Address 1805 PONCE DE LEON BLVD

SUITE 400 SUITE 400

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title MGR Title MGR

Name CAFFARO, EMILIO M Name CAFFARO, CHRISTIAN J

Address 1805 PONCE DE LEON BLVD Address 1805 PONCE DE LEON BLVD

SUITE 400 SUITE 400

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title MGR

Name COSTA, MONICA E

Address 1805 PONCE DE LEON BLVD

SUITE 400

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: HORACIO A. CAFFARO MGR 04/28/2017

FILED Apr 28, 2017

**Secretary of State** 

CR2760443373