

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000095880

**Entity Name:** BCM PRIME, LLC

**Current Principal Place of Business:**

900 BISCAYNE BLVD.  
UNIT 4809  
MIAMI, FL 33132

**Current Mailing Address:**

C/O PIQUET LAW FIRM PA  
1000 BRICKELL AVENUE SUITE 201  
MIAMI, FL 33131 US

**FEI Number:** 99-0361159

**Certificate of Status Desired:** No

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

PROFESSIONAL CORPORATE SERVICES, LLC  
1000 BRICKELL AVENUE  
SUITE 201  
MIAMI, FL 33131 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:** INDYARA CATRAMBY ANDION PIQUET

04/05/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name COPPOLA BOVE, ALBERTO  
Address 1000 BRICKELL AVENUE  
SUITE 201  
City-State-Zip: MIAMI FL 33131

Title MGRM  
Name MENDONCA, LUIZ  
Address 1000 BRICKELL AVENUE  
SUITE 201  
City-State-Zip: MIAMI FL 33131

Title MGRM  
Name DE SOUZA CINTRA, FABIANO  
Address 1000 BRICKELL AVENUE  
SUITE 201  
City-State-Zip: MIAMI FL 33131

Title MGRM  
Name HELOISA DE LUCA RONGENO  
CINTRA  
Address 1000 BRICKELL AVENUE  
SUITE 201  
City-State-Zip: MIAMI FL 33131

*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:** ALBERTO COPPOLA BOVE

MGRM

04/05/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date