

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000120499

Entity Name: IBERVILLE LIMITADA, LLC

Current Principal Place of Business:

5008 SHADOW BRANCH ST.
BAKERSFIELD, CA 93313

Current Mailing Address:

5008 SHADOW BRANCH ST.
BAKERSFIELD, CA 93313 US

FEI Number: 27-4022473

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARIETTA MAINIERI, P.A.
2100 PONCE DE LEON BLVD.
SUITE 1050-B
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: MARIETTA MAINIERI

04/06/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name LICO, PATRICIA SILVIA
Address 5008 SHADOW BRANCH ST.
City-State-Zip: BAKERSFIELD CA 93313

Title MGR
Name REGUEIRA, MARCELO ALBERTO
Address 5008 SHADOW BRANCH ST.
City-State-Zip: BAKERSFIELD CA 93313

Title MGR
Name TOMASINO, MARIA LAURA
Address 5008 SHADOW BRANCH ST.
City-State-Zip: BAKERSFIELD CA 93313

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: PATRICIA SILVIA LICO

MANAGER

04/06/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date