

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000121522

**Entity Name:** LATAM INICIATIVAS Y PARTICIPACIONES LLC

**Current Principal Place of Business:**

JUNCAL 1420  
APT 501  
MONTEVIDEO, URUGUAY UY 11000

**Current Mailing Address:**

7750 SW 117 AVENUE  
SUITE 206  
MIAMI, FL 33183 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

GLOBAL TAX AND ESTATE COUNSEL, LLP  
1111 BRICKELL AVENUE  
SUITE 1100  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name CALVO-FLORES, ANTONIO M  
Address JUNCAL 1420  
APT 501  
City-State-Zip: MONTEVIDEO URUGUAY UY 11000

Title MGRM  
Name ROHR PETTIGREW, ANA INES  
Address JUNCAL 1420  
APT 501  
City-State-Zip: MONTEVIDEO URUGUAY UY 11000

Title MGR  
Name ETCHEGARAY ALBANELL, PEDRO  
Address JUNCAL 1420  
APT 501  
City-State-Zip: MONTEVIDEO URUGUAY UY 11000

*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:** PEDRO ETCHEGARAY ALBANELL

**MANAGER**

**01/16/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date