

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000003780

**Entity Name:** AGAVES, LLC

**Current Principal Place of Business:**

150 S.E. 2ND AVENUE, SUITE #1010  
MIAMI, FL 33131

**Current Mailing Address:**

150 S.E. 2ND AVENUE, SUITE #1010  
MIAMI, FL 33131

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

BOLOGNA, STAFANIA ESQ.  
150 S.E. 2ND AVENUE, SUITE #1010  
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 MGR  
Name LOMONACO, LUIGI  
Address CORSO MONCALIERI 335  
City-State-Zip: 10133 TORINO, ITALY

*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:** LUIGI LOMONACO

MGR

04/24/2015

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

\_\_\_\_\_  
Date