2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000032345

Entity Name: PROJECT 8, LLC

Current Principal Place of Business:

2525 PONCE DE LEON BLVD.

SUITE 1225

CORAL GABLES, FL 33134

Current Mailing Address:

2525 PONCE DE LEON BLVD. **SUITE 1225**

CORAL GABLES, FL 33134

FEI Number: 45-1606996 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INTERAMERICAN CORPORATE SERVICES LLC 2525 PONCE DE LEON BLVD. **SUITE 1225**

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:

Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR Title MGR

Name AVILA, ALCIDES I Name HERNANDEZ, PATRICIA M

2525 PONCE DE LEON BLVD, STE. 2525 PONCE DE LEON BLVD, STE. Address Address 1225

1225

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

Title MGR Title MGR

Name GARRO, ASNARDO Name RODRIGUEZ, WILFREDO A Address 2525 PONCE DE LEON BLVD, STE. Address 2525 PONCE DE LEON BLVD.

SUITE 1225 1225

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

Title MGR Title MGR

MENA, DANIEL O FERRI, MARCO Name Name

2525 PONCE DE LEON BLVD. 2525 PONCE DE LEON BLVD. Address Address

SUITE 1225 SUITE 1225

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

Title Title MGR MGR

Name HERNANDEZ, EUGENIO Name BARRETO TERCILLA, MAGGIE Address 2525 PONCE DE LEON BLVD. Address 2525 PONCE DE LEON BLVD.

SUITE 1225 SUITE 1225

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

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: ALCIDES AVILA **MANAGER** 01/28/2016

FILED Jan 28, 2016

Secretary of State

CC7653890298