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: CARLOS DA SILVA BATISTA PRESIDENT

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

MIAMI, FL 33132

Current Mailing Address:

900 BISCAYNE BLVD., 1703 MIAMI, FL 33132

FEI Number: 35-2424587

Name and Address of Current Registered Agent:

CEBALLOS, HAYDEE CPA 890 SOUTH DIXIE HIGHWAY CORAL GABLES, FL 33146 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	: HAYDEE CEBALLOS			02/24/2015
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGRM	Title	MGRM	
Name	DA SILVA BATISTA, CARLOS	Name	AMORIM BATISTA L, LIDIA	
Address	900 BISCAYNE BLVD., UNIT # 1703	Address	CARVALHO 900 BISCAYNE BLVD., UNIT # 1703	1702
City-State-Zip:	MIAMI FL 33132		900 DISCATINE DEVD., UNIT # 1703	
		City-State-Zip:	MIAMI FL 33132	

900 BISCAYNE BLVD., 1703

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000036953

Entity Name: 900 BISCAYNE 1703 LLC

Current Principal Place of Business:

Feb 24, 2015 Secretary of State CC1727196047

FILED

Certificate of Status Desired: No

02/24/2015

Electronic Signature of Signing Authorized Person(s) Detail