

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000051507

**Entity Name:** CASALA, L.L.C.

**Current Principal Place of Business:**

244 BISCAYNE BLVD, APT. 2504 NORTH  
MIAMI, FL 33132

**Current Mailing Address:**

244 BISCAYNE BLVD, APT. 2504 NORTH  
MIAMI, FL 33132 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

CALABRIA, LEONARDO S  
244 BISCAYNE BLVD, APT. 2504 NORTH  
MIAMI, FL 33132 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 CALABRIA, LEONARDO S  
Address ABEL ACOSTA 202, MORON  
City-State-Zip: BUENOS AIRES, ARGENTINA XX

Title MGRM  
Name PIETRANDREA, MARIA L  
Address ABEL ACOSTA 202, MORON  
City-State-Zip: BUENOS AIRES, ARGENTINA XX

*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:** LEONARDO CALABRIA

**MANAGER**

**01/11/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date