Electronic Signature of Signing Authorized Person(s) Detail

#### 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000057745

Entity Name: 3S VENTURE ASSOCIATES, LLC

### **Current Principal Place of Business:**

801 BRICKELL KEY BLVD. UNIT 1002 MIAMI, FL 33131

## **Current Mailing Address:**

801 BRICKELL KEY BLVD. **UNIT 1002** MIAMI, FL 33131 US

### FEI Number: 45-2279632

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

TISAIRE, RAMON 801 BRICKELL KEY BLVD. **UNIT 1002** 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

Authorized Person(s) Detail :			
Title	PRESIDENT	Title	MANAGER
Name	TISAIRE, RAMON	Name	TISAIRE, MARGARITA S
Address	801 BRICKELL KEY BLVD., UNIT 1002	Address	801 BRICKELL KEY BLVD., UNIT 1002
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131

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.

PRESIDENT

FILED Apr 24, 2015 Secretary of State CC1622031323

Certificate of Status Desired: Yes

04/24/2015

Date

Date