

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000103264

**Entity Name:** PROMOTING LOGISTICS, LLC

**Current Principal Place of Business:**

11401 NW 134 STREET  
SUITE 108  
MEDLEY, FL 33178

**FILED**  
**Jan 06, 2015**  
**Secretary of State**  
**CC3830183317**

**Current Mailing Address:**

11401 NW 134 STREET  
SUITE 108  
MEDLEY, FL 33178 US

**FEI Number:** 45-3837406

**Certificate of Status Desired:** Yes

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

ATRIUM REGISTERED AGENTS, INC.  
1500 SAN REMO AVE., SUITE 125  
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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	DE FREITAS, ANTHONY	Name	BELLO DE FREITAS, IVEL C
Address	11401 NW 134 STREET SUITE 108	Address	11401 NW 134 STREET SUITE 108
City-State-Zip:	MEDLEY FL 33178	City-State-Zip:	MEDLEY FL 33178
Title	MGR	Title	MGR
Name	DE FREITAS, JUALI	Name	BUSTOS, ENNIO
Address	11401 NW 134 STREET SUITE 108	Address	11401 NW 134 STREET SUITE 108
City-State-Zip:	MEDLEY FL 33178	City-State-Zip:	MEDLEY FL 33178
Title	MGR		
Name	OSCAR, RODRIGUEZ		
Address	11401 NW 134 STREET SUITE 108		
City-State-Zip:	MEDLEY FL 33178		

*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:** ENNIO BUSTOS

MGR

01/06/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date