that my name appears above, or on an attachment with all other like empowered. SIGNATURE: FABIAN PODESTA

Electronic Signature of Signing Authorized Person(s) Detail

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000119765

Entity Name: INVERSIONES IMAJUMA LLC

Current Principal Place of Business:

244 BISCAYNE BOULEVARD UNIT 213 MIAMI, FL 33131

Current Mailing Address:

244 BISCAYNE BOULEVARD UNIT 213 MIAMI, FL 33131 US

FEI Number: 99-0370735

Name and Address of Current Registered Agent:

FLORIDIAN TITLE GROUP 2999 NE 191ST STREET PH 8 AVENTURA, FL 33180 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	Title	MGM
Name	PODESTA, JORGE	Name	PODESTA, FABIAN
Address	244 BISCAYNE BOULEVARD UNIT 213	Address	244 BISCAYNE BOULEVARD UNIT 213
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131

Certificate of Status Desired: No

Apr 21, 2014 Secretary of State CC5110869385

FILED

04/21/2014

Date

MGR

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