

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000041461

Entity Name: KOEX LLC

Current Principal Place of Business:

2525 PONCE DE LEON BLVD
SUITE 300
CORAL GABLES, FL 33134

Current Mailing Address:

2525 PONCE DE LEON BLVD
SUITE 300
CORAL GABLES, FL 33134 US

FEI Number: 45-4883975

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALONSO & GARCIA PA
5805 BLUE LAGOON DR
200
MIAMI, FL 33126 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: DOMINGO ALONSO

03/17/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name LEGORGEU, JOSE I
Address 2525 PONCE DE LEON BLVD
SUITE 300
City-State-Zip: CORAL GABLES FL 33134

Title MGR
Name ASTORQUI SARASUA, LUIS
Address C/ MAR MEDITERRANEO, 61 1C
City-State-Zip: 28221 MAJADAHONDA MAD. SPAIN
XXXXX-XXXX

Title MGRM
Name KOEX DISTRIBUCION INTEGRAL SL
Address C/ DELCO 1-3, 3 PLANTA
City-State-Zip: 28914 LEGANES MADRID SPAIN
XXXXX-XXXX

Title MGR
Name PEREZ SANZ, SEBASTIAN
Address C/ MAR MEDITERRANEO, 73 1B
City-State-Zip: 28221 MAJADAHONDA MAD. SPAIN
XXXXX-XXXX

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: LEGORGEU, JOSE I

MGR

03/17/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date