

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000052447

Entity Name: CONSULTATIO BAL HARBOUR, LLC**Current Principal Place of Business:**1395 BRICKELL AVENUE
SUITE 950
MIAMI, FL 33131**Current Mailing Address:**1395 BRICKELL AVENUE
SUITE 950
MIAMI, FL 33131 US**FEI Number:** 90-0822752**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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
Name COSTANTINI, EDUARDO F
Address 1395 BRICKELL AVENUE
SUITE 950
City-State-Zip: MIAMI FL 33131

Title MGR.
Name COSTANTINI, CRISTIAN
Address 1395 BRICKELL AVENUE
SUITE 950
City-State-Zip: MIAMI FL 33131

Title MGR.
Name CHOUHY, JOSE M.
Address 1395 BRICKELL AVENUE
SUITE 950
City-State-Zip: MIAMI FL 33131

Title MGR.
Name COSTANTINI, MARIANA
Address 1395 BRICKELL AVENUE
SUITE 950
City-State-Zip: MIAMI FL 33131

Title MGR.
Name CORTI-MADERNA, MARCOS
Address 1395 BRICKELL AVENUE
SUITE 950
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.

SIGNATURE: MARCOS CORTI-MADERNA

MGR

03/05/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date