#### 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.

MGR

SIGNATURE: MARCELO ZALCMAN

Electronic Signature of Signing Authorized Person(s) Detail

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUA
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DOCUMENT# L12000058047

Entity Name: DEPARTAMENTOS MIAMI LLC

# **Current Principal Place of Business:**

3232 CORAL WAY APT 204 MIAMI, FL 33145

# **Current Mailing Address:**

PO BOX 143677 MIAMI, FL 33114 US

# FEI Number: APPLIED FOR

### Name and Address of Current Registered Agent:

VALLEJO CONSULTING INTERNATIONAL INC 3232 CORAL WAY APT 204 MIAMI, FL 33145 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	: LUCAS VALLEJO			07/06/2015
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	MGR	
Name	BRONSZTEIN, GUIDO	Name	ZALCMAN, MARCELO	
Address	PO BOX 143677	Address	PO BOX 143677	
City-State-Zip:	MIAMI FL 33114	City-State-Zip:	MIAMI FL 33114	

REPORT

07/06/2015

# FILED Jul 06, 2015 Secretary of State CC1959132539

Certificate of Status Desired: No

Date