

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000079190

**Entity Name:** EPKIEL USA LLC

**Current Principal Place of Business:**

555 NE 15TH STREET  
SUITE 200  
MIAMI, FL 33132

**Current Mailing Address:**

555 NE 15TH STREET  
SUITE 200  
MIAMI, FL 33132 US

**FEI Number:** 45-5497290

**Certificate of Status Desired:** No

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

BEDARD, DENNIS  
1717 N.BAYSHORE DR.  
SUITE 215  
MIAMI, FL 33132 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 KIELWASSER, PATRICK  
Address VILLA GABRIELLE, 16 BVD  
CHATEAUBRIAND  
City-State-Zip: HYERES FR 83400

Title MGR  
Name KIELWASSER, EVELYNE  
Address VILLA GABRIELLE, 16 BVD  
CHATEAUBRIAND  
City-State-Zip: HYERES FR 83400

*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:** PATRICK KIELWASSER

**MGR**

**02/23/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date