2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000099243

Entity Name: AVENIR HOLDINGS, LLC

Current Principal Place of Business:

550 BILTMORE WAY, SUITE 1110 CORAL GABLES. FL 33134

Current Mailing Address:

550 BILTMORE WAY, SUITE 1110 CORAL GABLES. FL 33134

FEI Number: 46-1001426 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ECKSTEIN SCHECHTER, ROSA ESQ. 550 BILTMORE WAY, SUITE 1110 CORAL GABLES, FL 33134 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

FILED Apr 22, 2015

Secretary of State

CC4575536674

Authorized Person(s) Detail:

Title Title VΡ

SERVIANSKY, DAVID STERN, RODOLFO Name Name

550 BILTMORE WAY, SUITE 1110 550 BILTMORE WAY, SUITE 1110 Address Address

City-State-Zip: CORAL GABLES FL 33134 CORAL GABLES FL 33134 City-State-Zip:

Title VP, SECRETARY Title VP, TREASURER Name

HORWITZ, ROBERTO Name STERN, EDUARDO

Address 550 BILTMORE WAY, SUITE 1110 Address 550 BILTMORE WAY, SUITE 1110

CORAL GABLES FL 33134 City-State-Zip: City-State-Zip: CORAL GABLES FL 33134

Title VΡ \/P Title

Name LOPEZ, E. DANIEL Name MATO, MANUEL M.

Address 550 BILTMORE WAY, SUITE 1110 550 BILTMORE WAY, SUITE 1110 Address

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title

CEPERO, VIRGINIA Name

550 BILTMORE WAY, SUITE 1110 Address

CORAL GABLES FL 33134 City-State-Zip:

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: DAVID SERVIANSKY **PRESIDENT**

Electronic Signature of Signing Authorized Person(s) Detail

04/22/2015 Date