

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000100409

**Entity Name:** VIAJES QUIRON CA LLC

**Current Principal Place of Business:**

4471 NW 36TH ST  
STE 233  
MIAMI SPRINGS, FL 33166

**Current Mailing Address:**

8928 NW 27TH ST  
CORAL SPRINGS, FL 33065 US

**FEI Number:** 45-5440283

**Certificate of Status Desired:** No

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

BORRERO, AILEC ELENA  
8928 NW 27TH ST  
CORAL SPRINGS, FL 33065 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           | MGRM                      | Title           | MGR                    |
| Name            | BORRERO, AILEC E          | Name            | BORRERO, CARLOS L      |
| Address         | 4471 NW 36TH ST - STE 233 | Address         | 8928 NW 22227TH ST     |
| City-State-Zip: | MIAMI SPRINGS FL 33166    | City-State-Zip: | CORAL SPRINGS FL 33065 |

*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:** AILEC BORRERO

GMRM

03/20/2015

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

\_\_\_\_\_  
Date