

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000103761

**Entity Name:** BAROUX LLC**Current Principal Place of Business:**1418 COLLINS AVE  
MIAMI BEACH, FL 33139**Current Mailing Address:**1040 ROUTE DE FABREGAS  
LA SEYNE SUR MER, FRANCE 83500 FR**FEI Number:** 90-0879609**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BEJAR, VALENTIN  
18611 SW 24TH STEET  
MIRAMAR, FL 33029 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:** BEJAR VALENTIN

02/08/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM
Name	BAROUX, ALAIN
Address	1040 ROUTE DE FABREGAS
City-State-Zip:	LA SEYNE SUR MER 83500

Title	MANAGING MEMBER
Name	GRABLY/BAROUX, SABINE
Address	1040 ROUTE DE FABREGAS
City-State-Zip:	LA SEYNE SUR MER 83500

Title	AUTHORIZED MEMBER
Name	BAROUX, SAMUEL
Address	1040 ROUTE DE FABREGAS
City-State-Zip:	LA SEYNE SUR MER 83500

Title	AUTHORIZED MEMBER
Name	BAROUX, DANIEL
Address	1040 ROUTE DE FABREGAS
City-State-Zip:	LA SEYNE SUR MER 83500

Title	AUTHORIZED MEMBER
Name	BAROUX , RAPHAEL
Address	1040 ROUTE DE FABREGAS
City-State-Zip:	LA SEYNE SUR MER FRANCE 83500

Title	AUTHORIZED MEMBER
Name	BAROUX, DAVID
Address	1040 ROUTE DE FABREGAS
City-State-Zip:	LA SEYNE SUR MER FRANCE 83500

*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:** BAROUX ALAIN

MGRM

02/08/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date