

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000125665

**Entity Name:** GATI FIRMA, LLC

**Current Principal Place of Business:**

1395 BRICKELL AVENUE  
SUITE 800  
MIAMI, FL 33131

**Current Mailing Address:**

1395 BRICKELL AVENUE  
SUITE 800  
MIAMI, FL 33131

**FEI Number:** 90-0894446

**Certificate of Status Desired:** No

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

DOMINGUEZ, GERARDO  
1395 BRICKELL AVENUE  
SUITE 800  
MIAMI, FL 33131 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 GONZALEZ, ALBERTO  
Address 1395 BRICKELL AVENUE, SUITE 800  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name DE LAS NIEVES, MARIA  
Address 1395 BRICKELL AVENUE, SUITE 800  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name GONZALEZ SEGHEZZO, GUILLERMO  
Address 1395 BRICKELL AVENUE, SUITE 800  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name GONZALEZ SEGHEZZO, MARIA DEL MAR  
Address 1395 BRICKELL AVENUE, SUITE 800  
City-State-Zip: MIAMI FL 33131

*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:** DE LAS NIEVES MARIA

**MANAGER**

**01/19/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date