

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000133381

**Entity Name:** PORTO VENERE, LLC.

**Current Principal Place of Business:**

1110 HALESWORTH DRIVE  
POTOMAC, MD 20854-5180

**Current Mailing Address:**

1110 HALESWORTH DRIVE  
POTOMAC, MD 20854-5180

**FEI Number: 80-0743176**

**Certificate of Status Desired: No**

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

R & P ACCOUNTING & TAXES, INC.  
200 SE 1ST STREET SUITE 604  
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 MGRM  
Name SACERDOTI, SILVANA  
Address 1110 HALESWORTH DRIVE  
City-State-Zip: POTOMAC MD 20854-5180

Title MGRM  
Name SACERDOTI, RICARDO  
Address 1110 HALESWORTH DRIVE  
City-State-Zip: POTOMAC MD 20854-5180

Title MGRM  
Name DE SACERDOTI, CATALINA K  
Address 1110 HALESWORTH DRIVE  
City-State-Zip: POTOMAC MD 20854-5180

*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: SACERDOTI , SILVANA**

**MGRM**

**06/29/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date