

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000012000

**Entity Name:** PROKOR 2, LLC

**Current Principal Place of Business:**

8700 W FLAGLER STREET  
SUITE 160  
MIAMI, FL 33174

**Current Mailing Address:**

8700 W FLAGLER STREET  
SUITE 160  
MIAMI, FL 33174

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

TARACIDO, NELSON ESQ.  
8700 W FLAGLER STREET  
SUITE 170  
MIAMI, FL 33174 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            KORDA, ANDRES  
Address        8700 W FLAGLER STREET, #160  
City-State-Zip: MIAMI FL 33174

Title            MGRM  
Name            SHIERA, ABRAHAM  
Address        8700 W FLAGLER STREE, SUITE 160  
City-State-Zip: MIAMI FL 33174

*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:** ANDRES KORDA

**MGR**

**04/17/2015**

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

\_\_\_\_\_  
Date