

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000018626

**Entity Name:** ALEZOR GROUP, LLC

**Current Principal Place of Business:**

1000 BRICKELL AVENUE STE. #640  
MIAMI, FL 33131

**Current Mailing Address:**

1000 BRICKELL AVENUE STE. #640  
MIAMI, FL 33131

**FEI Number:** 90-0933790

**Certificate of Status Desired:** No

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

ABREU BARRETO, ALEJANDRO A  
1000 BRICKELL AVENUE STE. #640  
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 ABREU BARRETO, ALEJANDRO A  
Address 1000 BRICKELL AVENUE STE. #640  
City-State-Zip: MIAMI FL 33131

Title MGRM  
Name ABREU NUNEZ, VERONICA  
Address 1000 BRICKELL AVENUE STE. #640  
City-State-Zip: MIAMI FL 33131

Title MGRM  
Name ABREU NUNEZ, ALBERTO  
Address 1000 BRICKELL AVENUE STE. #640  
City-State-Zip: MIAMI FL 33131

Title MGRM  
Name ABREU NUNEZ, ALVARO  
Address 1000 BRICKELL AVENUE STE. #640  
City-State-Zip: MIAMI FL 33131

Title MGRM  
Name MARIA ZORAIDA ESTHER NUNEZ DE ABREU  
Address 1000 BRICKELL AVENUE STE. #640  
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:** MARIA ALEJANDRA ALFONZO

**PROPERTY MANAGER**

**04/28/2015**

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

\_\_\_\_\_  
Date