## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000057517 Entity Name: MAFE 2013 LLC

**Current Principal Place of Business:** 

1565 N PARK DR SUITE 100 WESTON, FL 33326

**Current Mailing Address:** 

1565 N PARK DR SUITE 100 WESTON, FL 33326 US

**FEI Number: APPLIED FOR** Certificate of Status Desired: No

Name and Address of Current Registered Agent:

**HOMERICH** 1565 N PARK DR SUITE 100 WESTON, FL 33326 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: JOSE A MATA 05/01/2014

Electronic Signature of Registered Agent

Date

**FILED** May 01, 2014

**Secretary of State** 

CC5644722131

Authorized Person(s) Detail:

Title MGR Title MGR

GONZALEZ ARIAS, FREDDY VALLE GERMAN GARCIAS, EGRARIO Name Name

DEL

**MGR** 

1565 N PARK DR SUITE 100 Address Address 1565 N PARK DR SUITE 100

City-State-Zip: WESTON FL 33326 City-State-Zip: WESTON FL 33326

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.

Electronic Signature of Signing Authorized Person(s) Detail