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.

MEMBER

SIGNATURE: ANTONIO CARLOS POLSAQUE

Electronic Signature of Signing Authorized Person(s) Detail

1401 BRICKELL AVE STE 500

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	ERICK MAGNO				
	Electronic Signature of Registered Agent			Date	
Authorized I	Person(s) Detail :				
Title	MGRM	Title	MANAGER		
Name	POLSAQUE, ANTONIO CARLOS	Name	POLSAQUE, URSULA MARIA		
Address	7701 SW 129TH STREET	Address	1401 NW 89TH CT		
City-State-Zip:	PINECREST FL 33156	City-State-Zip:	DORAL FL 33172		

### **Current Mailing Address:**

1401 NW 89TH CT DORAL, FL 33172 US

# FEI Number: 46-2847419

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

MAGNO & ASSOCIATES, PL MIAMI, FL 33131 US

**Current Principal Place of Business:** 

Entity Name: BASELOG USA LLC

DOCUMENT# L13000075743

1401 NW 89TH CT DORAL, FL 33172

### 2016 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

Certificate of Status Desired: No

## FILED Nov 18, 2016 Secretary of State CC9597567238

11/18/2016 Date