

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000086496

**Entity Name:** MAICAMACUTO, LLC

**Current Principal Place of Business:**

3919 VISTA GROVE LN  
WESTON, FL 33332

**Current Mailing Address:**

3919 VISTA GROVE LN  
WESTON, FL 33332 US

**FEI Number:** 30-0787580

**Certificate of Status Desired:** No

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

SILVAS FINANCIAL SERVICES LLC  
5220 S UNIVERSITY DR  
STE C-102  
DAVIE, FL 33328 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:** MARIO SILVA

03/04/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGRM
Name	BARNOLA, JOSE P	Name	SERRANO, NURIA
Address	3919 VISTA GROVE LN	Address	3919 VISTA GROVE LN
City-State-Zip:	WESTON FL 33332	City-State-Zip:	WESTON FL 33332

*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:** JOSE P BARNOLA

MGMR

03/04/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date