

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000092461

Entity Name: AMOCARO, LLC

Current Principal Place of Business:

789 CRANDON BLVD. #1505
KEY BISCAYNE, FL 33149

Current Mailing Address:

789 CRANDON BLVD. #1505
KEY BISCAYNE, FL 33149

FEI Number: 46-3462338

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ATRIUM REGISTERED AGENTS, INC.
1500 SAN REMO AVENUE
SUITE 125
CORAL GABLES, FL 33146 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 MARIA CHRISTINA G.A. PEREIRA LEITE
Address 789 CRANDON BLVD. #1505
City-State-Zip: KEY BISCAYNE FL 33149

Title MGR
Name FERNANDO M.R. PEREIRA LEITE
Address 789 CRANDON BLVD. #1505
City-State-Zip: KEY BISCAYNE FL 33149

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: FERNANDO LEITE

MANAGER

01/30/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date