

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000116428

**Entity Name:** MARCOX, LLC

**Current Principal Place of Business:**

5493 WILES ROAD  
STE 105  
COCONUT CREEK, FL 33073

**Current Mailing Address:**

5493 WILES ROAD  
STE 105  
COCONUT CREEK, FL 33073 US

**FEI Number:** 80-0950068

**Certificate of Status Desired:** No

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

EAGLE TAX REPRESENTATION CORP  
5493 WILES ROAD  
STE 105  
COCONUT CREEK, FL 33073 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 DAS CHAGAS, MARCO A M  
Address RUA 102 C N96 SETOR SUL  
City-State-Zip: GOIANIA GO 74083--280

*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:** MARCO A M DAS CHAGAS

MGRM

04/27/2014

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

\_\_\_\_\_  
Date