

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000141032

**Entity Name:** LA TAXQUENA GROCERY LLC

**Current Principal Place of Business:**

819 S PARK AVENUE  
APOPKA, FL 32703

**Current Mailing Address:**

819 S PARK AVENUE  
APOPKA, FL 32703 US

**FEI Number: 46-3823788**

**Certificate of Status Desired: Yes**

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

PROCOPIO, REFUGIO  
41 W 7TH STREET  
APOKA, FL 32703 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 PROCOPIO, REFUGIO  
Address 41 W 7TH STREET  
City-State-Zip: APOPKA FL 32703

Title MGRM  
Name PROCOPIO, MARIA E  
Address 950 SHEELER AVENUE  
City-State-Zip: APOPKA FL 32730

*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: REFUGIO PROCOPIO**

**MGMR**

**01/15/2015**

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

\_\_\_\_\_  
Date