

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000030776

**Entity Name:** NEUVENTURE LLC**Current Principal Place of Business:**NEUSHOP  
15 SE 2ND AVENUE INGRAHAM BUILDING  
DOWNTOWN MIAMI, FL 33131**Current Mailing Address:**NEUSHOP  
15 SE 2ND AVENUE INGRAHAM BUILDING  
DOWNTOWN MIAMI, FL 33131 US**FEI Number:** 46-4897035**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DELGADO SOSA, RAUL  
NEUSHOP  
15 SE 2ND AVENUE INGRAHAM BUILDING  
DOWNTOWN MIAMI, FL 33131 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: MANAGER  
Name: DELGADO SOSA, RAUL  
Address: NEUSHOP  
15 SE 2ND AVENUE INGRAHAM BUILDING  
City-State-Zip: DOWNTOWN MIAMI FL 33131

Title: MANAGER  
Name: DELGADO ALCEGA, NICOLAS  
Address: NEUSHOP  
15 SE 2ND AVENUE INGRAHAM BUILDING  
City-State-Zip: DOWNTOWN MIAMI FL 33131

Title: MANAGER  
Name: ALCEGA UZCATEGUI, MARIA ALEJANDRA  
Address: NEUSHOP  
15 SE 2ND AVENUE INGRAHAM BUILDING  
City-State-Zip: DOWNTOWN MIAMI FL 33131

Title: MANAGER  
Name: DELGADO SOSA, RAFAEL  
Address: NEUSHOP  
15 SE 2ND AVENUE INGRAHAM BUILDING  
City-State-Zip: DOWNTOWN MIAMI FL 33131

*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:** RAUL DELGADO SOSA

MANAGER

04/13/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date