

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000031842

Entity Name: ROAM INVESTMENT, LLC**Current Principal Place of Business:**20180 NW 9TH DRIVE
PEMBROKE PINES, FL 33029**Current Mailing Address:**20180 NW 9TH DRIVE
PEMBROKE PINES, FL 33029**FEI Number:** 47-1565582**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ACCOUNTAX OFFICE SERVICES, CORP.
7590 NW 186 ST
206A
MIAMI, FL 33015 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 AMBR
Name MARTINEZ, ROBERTO
Address 20180 NW 9TH DRIVE
City-State-Zip: PEMBROKE PINES FL 33029

Title AUTHORIZED MEMBER
Name BRUNO PADILLA, JOSE JAVIER
Address 2664 SW 118 RD
City-State-Zip: MIRAMAR FL 33025

Title AUTHORIZED MEMBER
Name MARTINEZ TOSA, MARIANNE
Address 20180 NW 9TH DRIVE
City-State-Zip: PEMBROKE PINES FL 33029

Title AMBR
Name PADILLA DE MARTINEZ, ANA MARIA
Address 20180 NW 9TH DRIVE
City-State-Zip: PEMBROKE PINES FL 33029

Title AUTHORIZED MEMBER
Name BRUNO PADILLA, JOSE LUIS
Address 20180 NW 9TH DRIVE
City-State-Zip: PEMBROKE PINES FL 33029

Title AUTHORIZED MEMBER
Name MARTINEZ VASQUEZ, ROBERTO
ARTURO
Address 20180 NW 9TH DRIVE
City-State-Zip: PEMBROKE PINES FL 33029

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: ROBERTO MARTINEZ

AMBR

04/26/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date