

**2015 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L14000040223

**Entity Name:** 4LAYERS LLC

**Current Principal Place of Business:**

31 SE 6TH STREET  
SUITE 1703  
MIAMI, FL 33131

**Current Mailing Address:**

31 SE 6TH STREET  
SUITE 1703  
MIAMI, FL 33131 US

**FEI Number:** 46-5181223

**Certificate of Status Desired:** No

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

COIFMAN MICHAÏLOS, ALBERTO  
31 SE 6TH STREET  
SUITE 1703  
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 COIFMAN MICHAÏLOS, ALBERTO  
Address C.CUMANA, Q.ARAGUANEY,URB.EL CAFETAL  
City-State-Zip: CARACAS 01050

Title MANAGER  
Name COIFMAN H., AARON  
Address 31 SE 6TH STREET  
SUITE 1703  
City-State-Zip: MIAMI FL 33131

Title MANAGER  
Name COIFMAN A., VICTORIA  
Address 31 SE 6TH STREET  
SUITE 1703  
City-State-Zip: 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:** COIFMAN A. , VICTORIA

MANAGER

05/20/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date