

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000058287

**Entity Name:** ALRAYMAR LLC

**Current Principal Place of Business:**

5190 NORTH BAY RD  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

5190 NORTH BAY RD  
MIAMI BEACH, FL 33140

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

PAUL J SARDON PA  
201 MEDEIRA AV  
CORAL GABLES, FL 33134 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	PRES	Title	VP
Name	RASCON, ALFREDO R	Name	GRIMALT, MARI
Address	5190 NORTH BAY RD	Address	5190 NORTH BAY
City-State-Zip:	MIAMI BEACH FL 33140	City-State-Zip:	MIAMI FL 33140

*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:** ALFREDO RAYNE RASCON

**PRESIDENT**

**02/13/2017**

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

\_\_\_\_\_  
Date