

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000074142

Entity Name: E - FULFILLMENT LLC

Current Principal Place of Business:

550 BILTMORE WAY
STE 200
CORAL GABLES, FL 33134

Current Mailing Address:

550 BILTMORE WAY
STE 200
CORAL GABLES, FL 33134 US

FEI Number: 61-1736990

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CMS INTERNATIONAL ENTERPRISES, INC
550 BILTMORE WAY
STE 200
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 MGR
Name VALENTE SOARES, ANTONIO H
Address 550 BILTMORE WAY STE 200
City-State-Zip: CORAL GABLES FL 33135

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: ANTONIO H VALENTE SOARES

MGR

02/17/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date