

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000075147

Entity Name: BLACK VIOLETTE LLC

Current Principal Place of Business:

C/O ALEXANDRE BALLERINI
927 LINCOLN ROAD SUITE 200
MIAMI BEACH, FL 33139

Current Mailing Address:

C/O ALEXANDRE BALLERINI
927 LINCOLN ROAD SUITE 200
MIAMI BEACH, FL 33139 UN

FEI Number: 46-5628020

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALEXANDRE BALLERINI P.A.
927 LINCOLN ROAD - SUITE 200
MIAMI BEACH, FL 33139 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 BALLERINI, ALEXANDRE
Address 927 LINCOLN ROAD - SUITE 200
City-State-Zip: MIAMI BEACH FL 33139

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: ALEXANDRE BALLERINI

MGR

04/06/2015

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date