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: SANDRA ELIZONDO

Electronic Signature of Signing Authorized Person(s) Detail

.IF ιy 4

Authorized Person(s) Detail ·

SIGNATURE:

Authorized Person(s) Detail :				
	Title	AP	Title	AP
	Name	ELIZONDO, SANDRA	Name	ELIZONDO, WILBERT MARIO
	Address	9864 NW 122ND TER	Address	9864 NW 122ND TER
	City-State-Zip:	HIALEAH GARDENS FL 33018	City-State-Zip:	HIALEAH GARDENS FL 33018

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.

FEI Number: 46-5750591

HIALEAH GARDENS. FL 33018

Current Mailing Address: 9864 NW 122ND TER

HIALEAH GARDENS. FL 33018

DOCUMENT# L14000084440

9864 NW 122ND TER

Entity Name: ELIZABETHMARIO LLC

Current Principal Place of Business:

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

ELIZONDO, WILBERT 9864 NW 122ND TER HIALEAH GARDENS, FL 33018 US

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 30, 2015 Secretary of State CC5902086387

Certificate of Status Desired: No

Date

04/30/2015 Date

WILBERT ELIZONDO