

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000097826

**Entity Name:** MASTERCOPY LLC

**Current Principal Place of Business:**

22821 SW 107 AVENUE  
MIAMI, FL 33170

**Current Mailing Address:**

P.O. BOX 164505  
MIAMI, FL 33116-4505 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MCKINNEY-BROWN, RITA  
14561 PIERCE ST.  
MIAMI, FL 33176 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 BRYANT, JAMES  
Address P.O. BOX 164505  
City-State-Zip: MIAMI FL 33116-4505

Title MGRM  
Name SINGAL, SUMITRA  
Address P.O. BOX 164505  
City-State-Zip: MIAMI FL 33116-4505

*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: JAMES BRYANT**

**MGR**

**05/01/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date