# 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L14000117173

Entity Name: NESS INVEST, LLC

#### **Current Principal Place of Business:**

44 W FLAGLER STREET SUITE 2300 MIAMI, FL 33130

#### **Current Mailing Address:**

44 W FLAGLER STREET SUITE 2300 MIAMI, FL 33130 US

#### FEI Number: NOT APPLICABLE

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

EXCO US ATRIUM 44 W FLAGLER STREET SUITE 2300 MIAMI, FL 33130 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                     | : ALINE DARMOUNI                         |                 |                  | 04/24/2018 |
|-------------------------------|--|-----------------|------------------|------------|
|                               | Electronic Signature of Registered Agent |                 |                  | Date       |
| Authorized Person(s) Detail : |  |                 |                  |            |
| Title                         | MGR                                      | Title           | MGR              |            |
| Name                          | BARANES, GUY                             | Name            | BARANES, LYDIA   |            |
| Address                       | 1 RUE BENOUVILLE                         | Address         | 1 RUE BENOUVILLE |            |
| City-State-Zip:               | PARIS 75116                              | City-State-Zip: | PARIS 75116      |            |

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.

MANAGER

### SIGNATURE: BARANES GUY

Electronic Signature of Signing Authorized Person(s) Detail

## FILED Apr 24, 2018 Secretary of State CC7594232675

Certificate of Status Desired: No

04/24/2018

Date