

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000155250

Entity Name: GROOVESPARK LLC**Current Principal Place of Business:**2104 NE 123RD ST
NORTH MIAMI, 33181**Current Mailing Address:**1875 ALAMANDA DRIVE
NORTH MIAMI, FL 33181**FEI Number:** 47-2746008**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DEDESMA, PEDRO L
590 W 84 ST
HIALEAH, FL 33014 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 | FERREIRA, FLAVIA |
| Address | 1875 ALAMANDA DRIVE |
| City-State-Zip: | NORTH MIAMI FL 33181 |

| | |
|-----------------|----------------------|
| Title | MGR |
| Name | SA, RENATO |
| Address | 1875 ALAMANDA DRIVE |
| City-State-Zip: | NORTH MIAMI FL 33181 |

| | |
|-----------------|--------------------|
| Title | MGR |
| Name | RORRER, MISTY |
| Address | 1955 KEYSTONE BLVD |
| City-State-Zip: | N MIAMI FL 33181 |

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|-----------------|--------------------|
| Title | MGR |
| Name | DEDESMA, PEDRO L |
| Address | 1955 KEYSTONE BLVD |
| City-State-Zip: | N MIAMI FL 33181 |

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: PEDRO DEDESMA**MEMBER****04/30/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date