

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000157412

**Entity Name:** IL PAVONE US LLC

**Current Principal Place of Business:**

6355 NW 36 ST  
SUITE 407  
VIRGINIA GARDENS, FL 33166

**Current Mailing Address:**

6355 NW 36 ST  
SUITE 407  
VIRGINIA GARDENS, FL 33166 US

**FEI Number:** 47-5230014

**Certificate of Status Desired:** No

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

TOTAL CORPORATION SERVICES INC  
6355 NW 36 ST  
STE 407  
VIRGINIA GARDENS, FL 33166 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 PRUGNO SINISCALCHI, DAVIDE  
Address VIA PRINCIPE AMEDEO NO.17  
City-State-Zip: CAVA DE TIRRENI SA 84013

*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:** DAVIDE PRUGNO SINISCALCHI

MGR

04/26/2016

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date