

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000173308

Entity Name: NOVATIUM LLC**Current Principal Place of Business:**4220 SW 149TH TERR
MIRAMAR, FL 33027**Current Mailing Address:**4220 SW 149TH TERR
MIRAMAR, FL 33027 US**FEI Number:** 47-2275514**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CASIN CONSULTING LLC
1110 BRICKELL AVENUE
806
MIAMI, FL 33326 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 | MGRM |
| Name | BARRAL, RAUL F |
| Address | ESTEBAN DE LUCA 1963 |
| City-State-Zip: | CIUDAD AUTONOMA DE BS AS BS 1246 |

| | |
|-----------------|-------------------------------------|
| Title | MGRM |
| Name | LASCANO, ARIEL |
| Address | ESTEBAN DE LUCA 1963 |
| City-State-Zip: | CIUDAD AUTONOMA DE BS AS BS 1246 |

| | |
|-----------------|--------------------|
| Title | MGRM |
| Name | DURANTI, PABLO A |
| Address | 4220 SW 149TH TERR |
| City-State-Zip: | MIRAMAR FL 33027 |

| | |
|-----------------|-------------------------------------|
| Title | MGRM |
| Name | VERDILE, LUCAS G |
| Address | ESTEBAN DE LUCA 1963 |
| City-State-Zip: | CIUDAD AUTONOMA DE BS AS BS 1246 |

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: PABLO DURANTI**DIRECTOR****04/20/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date