

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000178477

**Entity Name:** BAHAMON CONSULTING & INVESTMENTS, LLC

**Current Principal Place of Business:**

900 S MIAMI AVENUE  
SUITE 2309  
MIAMI, FL 33130

**Current Mailing Address:**

900 S MIAMI AVENUE  
SUITE 2309  
MIAMI, FL 33130 US

**FEI Number:** 38-3944008

**Certificate of Status Desired:** No

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

ARDILA ZAPATA, LUIS F  
4585 PONCE DE LEON BLVD  
SUITE 609  
CORAL GABLES, FL 33146 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 AMBR  
Name BAHAMON DE RESTREPO, MARTHA  
Address CALLE 28 NO 13 A 24 OFICINA 307C  
City-State-Zip: BOGOTA CO 00000

Title AMBR  
Name RESTREPO BAHAMON, ANDRES  
Address CALLE 28 NO 13 A 24 OFICINA 307C  
City-State-Zip: BOGOTA CO 00000

Title AMBR  
Name RESTREPO BAHAMON, FELIPE  
Address CALLE 28 NO 13 A 24 OFICINA 307C  
City-State-Zip: BOGOTA CO 00000

Title AMBR  
Name RESTREPO BAHAMON, SANTIAGO  
Address CALLE 28 NO 13 A 24 OFICINA 307C  
City-State-Zip: BOGOTA CO 00000

Title AMBR  
Name RESTREPO BAHAMON, MATEO  
Address CALLE 28 NO 13 A 24 OFICINA 307C  
City-State-Zip: BOGOTA CO 00000

*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:** MARTHA BAHAMON DE RESTREPO

AMBR

04/29/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date