

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000087791

**Entity Name:** C & A CAPITAL MANAGEMENT, LLC**Current Principal Place of Business:**6405 NW 36TH STREET  
SUITE 117  
MIAMI, FL 33166**Current Mailing Address:**6405 NW 36TH STREET  
SUITE 117  
MIAMI, FL 33166 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COELHO, CHRISTIAN  
6405 NW 36TH STREET  
SUITE 117  
MIAMI, 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:** CHRISTIAN COELHO

01/29/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR
Name	COELHO, CHRISTIAN A
Address	11603 N.W. 89TH STREET, #101
City-State-Zip:	DORAL FL 33178
Title	AMBR
Name	COELHO, GERARDO M
Address	URB. 27 DE FEBRERO CC MIRANDA, B-33 - 35
City-State-Zip:	GUARENAS, MIRANDA MI 1220
Title	AMBR
Name	ABREU, FERNANDO
Address	URB. 27 DE FEBRERO CC MIRANDA, B-33 - 35
City-State-Zip:	GUARENAS, MIRANDA MI 1220

Title	AMBR
Name	COELHO, IGNACIO L
Address	URB. 27 DE FEBRERO CC MIRANDA, B-33 - 35
City-State-Zip:	GUARENAS, MIRANDA MI 1220
Title	AMBR
Name	COELHO, MANUEL
Address	URB. 27 DE FEBRERO CC MIRANDA, B-33 - 35,
City-State-Zip:	GUARENAS, MIRANDA MI 1220

*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:** COELHO , CHRISTIAN A

MGR

01/29/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date