

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000098296

**FILED**  
**Feb 20, 2016**  
**Secretary of State**  
**CC0454185484**

**Entity Name:** DMA PORTFOLIO MANAGEMENT LLC

**Current Principal Place of Business:**

10350 W BAY HARBOR DRIVE  
3U  
BAY HARBOR ISLAND, FL 33154

**Current Mailing Address:**

10350 W BAY HARBOR DRIVE  
3U  
BAY HARBOR ISLAND, FL 33154 US

**FEI Number:** 47-4218872

**Certificate of Status Desired:** No

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

DE MARINIS, MARIA G  
10350 W BAY HARBOR DRIVE  
3U  
BAY HARBOR ISLAND, FL 33154 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 DE MARINIS, MARIA G  
Address 10350 W BAY HARBOR DRIVE - 3U  
City-State-Zip: BAY HARBOR ISLAND FL 33154

Title MGR  
Name AGOPIAN, ALEXIS  
Address 1913 S OCEAN DRIVE - UNIT 238  
City-State-Zip: HALLANDALE FL 33009

Title MGR  
Name SILBERSTEIN, JORGE  
Address 5900 COLLINS AVE. APT. 807  
City-State-Zip: MIAMI BEACH FL 33140

Title MGR  
Name SILBERSTEIN, JORGE  
Address 5900 COLLINS AVE. APT. 807  
City-State-Zip: MIAMI BEACH FL 33140

*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:** MARIA GABRIELA DE MARINIS

**MGR**

**02/20/2016**

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

\_\_\_\_\_  
Date