

2016 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L15000107323

Entity Name: SHARO, LLC**Current Principal Place of Business:**3801 S OCEAN DR
UNIT 12E
HOLLYWOOD, FL 33019**Current Mailing Address:**1109 ALEXANDER BEND
WESTON, FL 33327 US**FEI Number:** 47-4360870**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ARGENTAX LLC
20801 BISCAYNE BLVD.
SUITE 403
AVENTURA, FL 33180 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	MMGR
Name	WILLIAMS, ESTANISLAO SR.
Address	210, 174 STREET # 2001
City-State-Zip:	SUNNY ISLES FL 33160

Title	S
Name	GARCIA, EVANGELINA R MS.
Address	210, 174 STREET # 2001
City-State-Zip:	SUNNY ISLES FL 33160

Title	MGR
Name	BOBBIO, MARCOS VICENTE
Address	1109 ALEXANDER BEND
City-State-Zip:	WESTON FL 33327

Title	MGR
Name	BOBBIO, MARCELA ENRIQUETA
Address	1109 ALEXANDER BEND
City-State-Zip:	WESTON FL 33327

Title	MGR
Name	BOBBIO, DONATELLA LOURDES
Address	1109 ALEXANDER BEND
City-State-Zip:	WESTON FL 33327

Title	MGR
Name	BOBBIO, PATRICIO MANUEL
Address	1109 ALEXANDER BEND
City-State-Zip:	WESTON FL 33327

Title	MGR
Name	BOBBIO, MARIA EVANGELINA
Address	1109 ALEXANDER BEND
City-State-Zip:	WESTON FL 33327

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: EVANGELINA GARCIA

S

05/16/2016

Electronic Signature of Signing Authorized Person(s) Detail_____
Date