

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000157010

Entity Name: BRICKS 1 LLC**Current Principal Place of Business:**850 SW 2ND AVE.,APT 1506
MIAMI, FL 33130**Current Mailing Address:**850 SW 2ND AVE.,APT 1506
MIAMI, FL 33130 US**FEI Number:** 47-5266043**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DURAN, ALFREDO G
2340 SOUTH DIXIE HIGHWAY
MIAMI, FL 33133 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 AZPURUA, ALBERTO
Address 8930 W FFLAGLER ST APT 105
City-State-Zip: MIAMI FL 33174

Title MGR
Name LARA, ALBERTO AZPURUA
Address 850 SW 2ND AVE.,APT 1506
City-State-Zip: MIAMI FL 33130

Title MGR
Name LOMELIN, MAURICIO ZAPIAIN
Address 850 SW 2ND AVE.,APT 1506
City-State-Zip: MIAMI FL 33130

Title MGR
Name ROMANO, DIEGO GONZALEZ
Address 850 SW 2ND AVE.,APT 1506
City-State-Zip: MIAMI FL 33130

Title AMBR
Name LARA, ALBERTO AZPURUA
Address 850 SW 2ND AVE.,APT 1506
City-State-Zip: MIAMI FL 33130

Title AMBR
Name LOMELIN, MAURICIO ZAPIAIN
Address 850 SW 2ND AVE.,APT 1506
City-State-Zip: MIAMI FL 33130

Title AMBR
Name ROMANO, DIEGO GONZALEZ
Address 850 SW 2ND AVE.,APT 1506
City-State-Zip: MIAMI FL 33130

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: ALBERTO AZPURUA

MGR

04/29/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date