

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000031638

**Entity Name:** CMA US LLC**Current Principal Place of Business:**2332 GALIANO STREET  
2ND FLOOR  
CORAL GABLES, FL 33134**Current Mailing Address:**1509 F.D. ROOSEVELT AVENUE  
GUAYNABO, PR 00968 US**FEI Number:** 81-1697446**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THE PCB FIRM, P.A.  
14938 HARTFORD RUN DR.  
ORLANDO, FL 32828 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 ARROYO-GARCIA, SUZ A  
Address THE RESIDENCES, APT. 213, PARQUE ESCORIAL  
City-State-Zip: CAROLINA PR 00987

Title AMBR  
Name CARRO-MIRANDA, JOSE A  
Address 70 CALLE SAN CRISTOBAL, URB. ADOQUINES  
City-State-Zip: SAN JUAN PR 00926

Title AMBR  
Name JANER-VILA, PEDRO A  
Address BOSQUE DE LAS FLORES, 92 TIAGOSAN  
City-State-Zip: BAYAMON PR 00956

Title AMBR  
Name RODRIGUEZ-BONILLA, ALVIN M  
Address B-18 CALLE 7 LOMAS DEL SOL  
City-State-Zip: GUAYNABO

Title AMBR  
Name BOFIL-VALDES, JORDI  
Address 394 REY RICARDO, LA VILLA DE TORRIMAR  
City-State-Zip: GUAYNABO PR 00969

Title AMBR  
Name JUSINO-ARROYO, GERALDO E.  
Address 13 CAMINO LOS BAEZ COND. EL BOSQUE APT.702  
City-State-Zip: GUAYNABO PR 00971

Title AMBR  
Name MERLE-RAMIREZ, LUIS F  
Address COND. IL VILLAGGIO J4 SAN PATRICIO AVENUE APT.302E (BOX 16)  
City-State-Zip: GUAYNABO OC 00968

Title AMBR  
Name TIRADO-RAMIREZ, JORGE A  
Address LOS FAROLES, 500 CARR, 861 APT103  
City-State-Zip: BAYAMON 00956

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*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:** SUZ A. ARROYO-GARCIA

AMBR

03/02/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title AMBR  
Name SANCHEZ-DE JESUS, ABRAHAM L  
Address 541 CALLE ALMACIGO  
City-State-Zip: RIO GRANDE 00745

Title AMBR  
Name TORRES-RODRIGUEZ, JOSE  
Address 1818 CALLE 6 SO URD.  
VILLA MAGNA  
City-State-Zip: SAN JUAN 00921

Title AMBR  
Name VALENTIN-CARRERO, FRANCISCO  
Address CC-37 PRINCESA  
City-State-Zip: TOA ALTA 00953

Title AMBR  
Name VERA-BEVERAGGI, ARIEL R  
Address PRQ. DE SAN IGNACIO A-34 CALLE I  
City-State-Zip: SAN JUAN 00921