

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000067386

**Entity Name:** AEQUILIBRIUM LLC

**Current Principal Place of Business:**

3900 NW 79 AVE  
SUITE 825  
DORAL, FL 33166

**Current Mailing Address:**

5252 NW 85 AVE  
APT 1007  
DORAL, FL 33166 US

**FEI Number:** 81-4732586

**Certificate of Status Desired:** No

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

MARCANO, IVAN J  
3900 NW 79 AVE  
SUITE 825  
DORAL, 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title            PRES  
Name            MARCANO, IVAN J  
Address        5252 NW 85 AVE  
                  APT 1007  
City-State-Zip: MIAMI FL 33166

*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:** IVAN MARCANO

**PRESIDENT**

**03/20/2017**

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

\_\_\_\_\_ Date