

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000110988

**Entity Name:** KIMIGEPO LLC

**Current Principal Place of Business:**

20801 BISCAYNE BLVD  
SUITE 403-1001  
AVENTURA, FL 33180

**Current Mailing Address:**

20801 BISCAYNE BLVD  
SUITE 403-1001  
AVENTURA, FL 33180 US

**FEI Number:** 30-0942770

**Certificate of Status Desired:** No

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

HERZSTEIN, MONIQUE  
20801 BISCAYNE BLVD  
SUITE 403-1001  
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	MGR	Title	MGR
Name	FONTAGNE, MICHEL	Name	FONTAGNE, CHRISTIANE
Address	61 ALLEE DES GENETS	Address	61 ALLEE DES GENETS
City-State-Zip:	AZUR LANDES 40140	City-State-Zip:	AZUR LANDES 40140

*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:** MICHEL FONTAGNE

**MGR**

**01/12/2018**

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

\_\_\_\_\_  
Date