

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000184876

Entity Name: KAPSULE LLC

Current Principal Place of Business:

555 NE 15 ST
SUITE 31G
MIAMI, FL 33132

Current Mailing Address:

555 NE 15 ST
SUITE 31G
MIAMI, FL 33132

FEI Number: 81-4098383

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARRA, ADALBERTO
555 NE 15TH STREET
SUITE 31G
MIAMI, FL 33132 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 ROCA, GUILLERMO
Address 555 NE 15 ST, SUITE 31G
City-State-Zip: MIAMI FL 33132

Title AMBR
Name ALVAREZ, ISAAC
Address 555 NE 15 ST, SUITE 31G
City-State-Zip: MIAMI FL 33132

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: ISAAC ALVAREZ

CEO

04/28/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date