

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000217026

**Entity Name:** LEMARO PRODUCT DEVELOPMENT, LLC

**Current Principal Place of Business:**

505 SAWGRASS CORPORATE PARKWAY  
SUNRISE, FL 33325

**Current Mailing Address:**

505 SAWGRASS CORPORATE PARKWAY  
SUNRISE, FL 33325

**FEI Number: 82-3139982**

**Certificate of Status Desired: No**

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

COBB EDDY, PLLC  
642 NE 3RD AVENUE  
FORT LAUDERDALE, FL 33304 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	AR	Title	MGR
Name	AMARO, RUBEN A	Name	GOMEZ, KATHERINE
Address	4098 CINNAMON WAY	Address	3762 E HIBISCUS STREET
City-State-Zip:	WESTON FL 33331	City-State-Zip:	WESTON FL 33332
Title	MEM		
Name	LEON CHAPARRO, ALEJANDRO		
Address	4098 CINNAMON WAY		
City-State-Zip:	WESTON FL 33331		

*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: RUBEN AMARO**

AR

06/27/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date