

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000035405

**Entity Name:** QUATTRO SHIPPING, LLC

**Current Principal Place of Business:**

3301 NE 183RD ST  
504  
AVENTURA, FL 33160

**Current Mailing Address:**

3301 NE 183RD ST  
504  
AVENTURA, FL 33160 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

QUADRIGA HOLDINGS, INC  
3301 NE 183RD ST  
504  
AVENTURA, FL 33160 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  
Name GOMEZ BARQUIN, RAMON JR.  
Address 3301 NE 183RD ST UNIT 504  
City-State-Zip: AVENTURA FL 33160

Title MGR  
Name GOMEZ BARQUIN, ALEJANDRO SR.  
Address 3301 NE 183RD ST UNIT 504  
City-State-Zip: AVENTURA FL 33160

Title MGR  
Name GOMEZ BARQUIN, GERARDO SR.  
Address 3301 NE 183RD ST UNIT 504  
City-State-Zip: AVENTURA FL 33160

Title MGR  
Name GOMEZ BARQUIN, ROSARIO M MRS  
Address 3301 NE 183RD ST UNIT 504  
City-State-Zip: AVENTURA FL 33160

Title MGR  
Name QUADRIGA HOLDINGS, INC  
Address 3301 NE 183RD ST  
City-State-Zip: AVENTURA FL 33160

*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:** RAMON GOMEZ

**MANAGER**

**06/02/2020**

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

\_\_\_\_\_  
Date