# 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000004850

Entity Name: R2 INTERNET VENTURES, L.L.C.

### **Current Principal Place of Business:**

2121 PONCE DE LEON BLVD. SUITE 800 CORAL GABLES, FL 33134

## **Current Mailing Address:**

2121 PONCE DE LEON BLVD. SUITE 800 CORAL GABLES, FL 33134

### FEI Number: 65-0940330

### Name and Address of Current Registered Agent:

URBINA, RAFAEL 2121 PONCE DE LEON BLVD SUITE 800 CORAL GABLES, FL 33134 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:

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Electronic Signature of Registered Agent

# Authorized Person(s) Detail :

Title	MGRM	Title	MGR	
Name	RAFAEL, URBINA-QUINTER	Name	SANTAELLA, HECTOR	
Address	2121 PONCE DE LEON BLVD STE 800	Address	2121 PONCE DE LEON BLVD STE 800	
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134	
Title	MGR	Title	MGR	
Name	LUCHSINGER, CARLOS	Name	PERAZA, LUIS	
Address	2121 PONCE DE LEON BLVD STE 800	Address	2121 PONCE DE LEON BLVD STE 800	
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134	
Title	MGR			
Name	TANCREDI, RODOLFO			
Address	2121 PONCE DE LEON BLVD STE 800			

City-State-Zip: CORAL GABLES FL 33134

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.

MANAGER

# SIGNATURE: RAFAEL URBINA-QUINTERO

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

06/13/2019

Date

Date