

**2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000001142

**Entity Name:** FLORIO WORLDWIDE, LLC**Current Principal Place of Business:**5200 TOWN CENTER CIRCLE, SUITE 600  
BOCA RATON, FL 33486**Current Mailing Address:**5200 TOWN CENTER CIRCLE, SUITE 600  
BOCA RATON, FL 33486 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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	MANAGER
Name	TERRY, CLARENCE E.
Address	5200 TOWN CENTER CIRCLE, SUITE 600
City-State-Zip:	BOCA RATON FL 33486

Title	MANAGER
Name	BRODY, MARK
Address	5200 TOWN CENTER CIRCLE, SUITE 600
City-State-Zip:	BOCA RATON FL 33486

Title	MANAGER
Name	SKILLEN, R. LYNN
Address	5200 TOWN CENTER CIRCLE, SUITE 600
City-State-Zip:	BOCA RATON FL 33486

Title	VP & ASST. SECRETARY
Name	MCCONVERY, MICHAEL J.
Address	5200 TOWN CENTER CIRCLE, SUITE 600
City-State-Zip:	BOCA RATON FL 33486

*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:** MICHAEL J. MCCONVERY

VP &amp; ASST. SECRETARY 04/16/2015

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