

**2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M16000006575

**Entity Name:** NOVUS SHOES USA, LLC**Current Principal Place of Business:**NOVUS #151  
548 PEMBROKE LAKES MALL 11401 PINES BLVD  
PEMBROKE PINES, FL 33026**Current Mailing Address:**655 CUBITAS STREET  
GUAYNABO, PUERTO RICO 00969 PR**FEI Number:** 66-0859128**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BRAVO, RAQUEL FAS  
7862 OAK GROVE CIR.  
LAKE WORTH, FL 33467 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:** RAQUEL FAS BRAVO

04/29/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                              |
|-----------------|------------------------------|
| Title           | MANAGER                      |
| Name            | CASTELLON NIGAGLIONI, CARLOS |
| Address         | 655 CUBITAS STREET           |
| City-State-Zip: | GUAYNABO PUERTO RICO 00969   |

|                 |                             |
|-----------------|-----------------------------|
| Title           | MGR                         |
| Name            | CASTELLON FERNANDEZ, CARLOS |
| Address         | 655 CUBITAS STREET          |
| City-State-Zip: | GUAYNABO PR 00969           |

|                 |                             |
|-----------------|-----------------------------|
| Title           | MGR                         |
| Name            | CASTELLON FERNANDEZ, SANDRA |
| Address         | 655 CUBITAS STREET          |
| City-State-Zip: | GUAYNABO PR 00969           |

*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:** CARLOS CASTELLON NIGAGLIONI

MANAGER

04/29/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date