

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2002 8:00 am
Secretary of State

05-12-2002 90580 036 ****50.00

DOCUMENT # L01000015271

1. Entity Name

**LATIN AMERICA ENTERPRISE FIXED INCOME MANAGEMENT
 , LLC**

Principal Place of Business

**701 BRICKELL AVE.
 SUITE 3000
 MIAMI FL 33131**

Mailing Address

**701 BRICKELL AVE.
 SUITE 3000
 MIAMI FL 33131**

957414

2. Principal Place of Business

**2665 S. Bayshore Drive
 Suite, Apt. #, etc.
 #1101**

3. Mailing Address

**2665 S. Bayshore Drive
 Suite, Apt. #, etc.
 # 1101**

City & State
Miami, Florida

City & State
Miami, Florida

Zip
33133

Country

Dade

Zip
33133

Country

Dade

4. FEI Number **95-4893848**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**INTRASTATE REGISTERED AGENT CORPORATION
 701 BRICKELL AVE.
 SUITE 3000
 MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00
 Make Check Payable to Department of State
 Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGR PCEO
 Aramburu, Diego
 701 Brickell Ave., Ste. 3000
 Miami, FL 33131** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGR SCFO
 Hernandez, Denise
 701 Brickell Ave., Ste. 3000
 Miami, FL 33131** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGR
 Hettinger, Jonathan
 701 Brickell Ave., Ste. 3000
 Miami, FL 33131** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGR PCEO
 Aramburu, Diego
 2665 South Bayshore Drive, Suite #1101
 Miami, FL 33133** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGR SCFO
 Hernandez, Denise
 2665 South Bayshore Drive, Suite # 1101
 Miami, Florida 33133** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGR
 Hettinger, Jonathan
 2665 South Bayshore Drive, Suite # 1101
 Miami, FL 33133** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

CR2E083 (9/01)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE: *Diego Aramburu* **4/29/02 (305) 285-4841**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #