

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000018384

**Entity Name:** ALEFRAN, LLC

**Current Principal Place of Business:**

1155 EAST ATLANTIC AVENUE  
#102  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

1155 EAST ATLANTIC AVENUE  
#102  
DELRAY BEACH, FL 33483 US

**FEI Number:** 76-0733205

**Certificate of Status Desired:** No

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

INGENITO, MATILDE  
834 NW 1ST AVE.  
DELRAY BEACH, FL 33444 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 MGRM  
Name ABADIA, HENRY  
Address 834 NW 1ST AVE.  
City-State-Zip: DELRAY BEACH FL 33444

Title MEMB  
Name INGENITO, MATILDE  
Address 834 NW 1ST AVE.  
City-State-Zip: DELRAY BEACH FL 33444

*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:** HENRY ABADIA

MGR

02/19/2016

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

\_\_\_\_\_ Date