| FEI Number: 20-2571317<br>Name and Address of Current Registered Agent:      |  |                       | Certificate of Status Desired: No       |                       |  |
|--|--|-----------------------|---|-----------------------|--|
| LEDO PROPERTY MANAGEMENT LLC<br>13795 NE 20TH PL<br>NORTH MIAMI, FL 33181 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. |                       |   |                       |  |
| The above named  | l entity submits this statement for the purpose of changing its regis  | tered office or regis | tered agent, or both, in the State of F | lorida.               |  |
|  | l entity submits this statement for the purpose of changing its regis<br>: LEANDRO DOMINGUEZ   | tered office or regis | tered agent, or both, in the State of F | lorida.<br>02/09/2015 |  |
|  |  | tered office or regis | tered agent, or both, in the State of F |                       |  |
| SIGNATURE  |  | tered office or regis | tered agent, or both, in the State of F | 02/09/2015            |  |
| SIGNATURE  | : LEANDRO DOMINGUEZ<br>Electronic Signature of Registered Agent  | tered office or regis | tered agent, or both, in the State of F | 02/09/2015            |  |
| SIGNATURE  | LEANDRO DOMINGUEZ     Electronic Signature of Registered Agent  Person(s) Detail :   |                       |   | 02/09/2015            |  |
| SIGNATURE<br>Authorized I  | Electronic Signature of Registered Agent  Person(s) Detail :  MGRM   | Title                 | MGRM                                    | 02/09/2015            |  |

13795 NE 20TH PL

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# 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: LEANDRO DOMINGUEZ

MANAGER

02/09/2015

Electronic Signature of Signing Authorized Person(s) Detail

## DOCUMENT# L05000030124

#### Entity Name: CASI INVESTMENTS LLC

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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

13795 NE 20TH PL NORTH MIAMI, FL 33181

# **Current Mailing Address:**

NORTH MIAMI. FL 33181

## FILED Feb 09, 2015 **Secretary of State** CC8017731661

Date