Electronic Signature of Signing Authorized Person(s) Detail

that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HANCOCK, PHILIP

ATTORNEY-IN-FACT

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

Authorized Person(s) Detail :

Title	MGR	Title	SECRETARY
Name	KLEPACH, BERNARD	Name	HANCOCK, PHILIP
Address	555 NE 185 ST	Address	555 NE 185 STREET SUITE 101
City-State-Zip:	MIAMI FL 33179		SUITE IUT
		City-State-Zip:	MIAMI FL 33179

SIGNATURE: DAVID E. MARKO

Current Principal Place of Business: 555 NE 185 STREET

SUITE 101

Current Mailing Address:

555 NE 185 STREET

FEI Number: APPLIED FOR

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

PALM BEACH GARDENS, FL 33410 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.

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000035128

Entity Name: CONCESSION MIAMI DUTY FREE, LLC

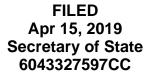
MIAMI, FL 33179

SUITE 101 MIAMI, FL 33179

CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD #221E

04/15/2019

Date



04/15/2019 Date

Certificate of Status Desired: No

PAOLO PERALTA,