

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000074101

**Entity Name:** INVERMASTER LLC

**Current Principal Place of Business:**

78 SW 7TH STREET  
WEWORK BRICKELL CITY CENTRE  
MIAMI, FL 33130

**Current Mailing Address:**

6538 COLLINS AVE  
UNIT 383  
MIAMI BEACH, FL 33141

**FEI Number:** 20-3245656

**Certificate of Status Desired:** Yes

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

PONCE ROMAY, ROBERTO EDUARDO  
6538 COLLINS AVE  
UNIT 383  
MIAMI BEACH, FL 33141 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:** ROBERTO EDUARDO PONCE ROMAY

01/03/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                              |                 |                              |
|-----------------|------------------------------|-----------------|------------------------------|
| Title           | MANAGER                      | Title           | AUTHORIZED REPRESENTATIVE    |
| Name            | PONCE ROMAY, ROBERTO EDUARDO | Name            | PONCE, CARMELA               |
| Address         | 6538 COLLINS AVE<br>UNIT 383 | Address         | 6538 COLLINS AVE<br>UNIT 383 |
| City-State-Zip: | MIAMI BEACH FL 33141         | City-State-Zip: | MIAMI BEACH FL 33141         |

*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:** ROBERTO EDUARDO PONCE ROMAY

MANAGER

01/03/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date