

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000120669

**FILED
Jan 15, 2015
Secretary of State
CC8198626094**

Entity Name: IND, LLC

Current Principal Place of Business:

2135 NW 115TH AVENUE
MIAMI, FL 33172

Current Mailing Address:

2135 NW 115TH AVENUE
MIAMI, FL 33172 US

FEI Number: 20-4076500

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CADENA, JUAN P
2135 NW 115TH AVENUE
MIAMI, FL 33172 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 P
Name CADENA, JUAN P
Address 2135 NW 115TH AVENUE
City-State-Zip: MIAMI FL 33172

Title VP
Name CADENA, ANATILDE C
Address 10938 NW 44 TERRACE
City-State-Zip: DORAL FL 33178

Title OTHER
Name CADENA, GUILLERMO E
Address 10938 NW 44 TERRACE
City-State-Zip: DORAL FL 33178

Title TREASURER, ASST. SECRETARY
Name CADENA, LUIS F
Address 10938 NW 44 TERRACE
City-State-Zip: DORAL FL 33178

Title SECRETARY
Name CADENA, LUIS E
Address 10938 NW 44 TERRACE
City-State-Zip: DORAL FL 33178

Title OTHER
Name CADENA, DANIELA
Address 10938 NW 44 TER
City-State-Zip: DORAL FL 33178-4215

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: LUIS F. CADENA

TREASURER

01/15/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date