

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000003190

**Entity Name:** DIRECT PLUS, LLC

**Current Principal Place of Business:**

806 S DOUGLAS ROAD, 9TH FLOOR  
CORAL GABLES, FL 33134

**Current Mailing Address:**

806 S DOUGLAS ROAD, 9TH FLOOR  
CORAL GABLES, FL 33134

**FEI Number:** 06-1765574

**Certificate of Status Desired:** No

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

MENENDEZ, FRANCISCO J  
2200 MUSEUM TOWER, 150 WEST FLAGLER STREET  
MIAMI, FL 33130 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	Title	ST
Name	BELLO, ANTONIO	Name	PEREZ, ALBERTO
Address	521 SAN ANTONIO AVE	Address	323 MALAGA AVE
City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	CORAL GABLES FL 33134

*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:** ANTONIO BELLO

**PRESIDENT**

**03/11/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date