

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000115345

Entity Name: CHALEKO POST, LLC

Current Principal Place of Business:

180 NE 39 ST
SUITE 220
MIAMI, FL 33137

Current Mailing Address:

3930 NE 2ND AVENUE
200
MIAMI, FL 33137 US

FEI Number: 26-1429021

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KELLEMEN, LUIS
1643 BRICKELL AVE., APT. 2105
MIAMI, FL 33129 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 MGRM
Name KELLEMEN, LUIS
Address 1643 BRICKELL AVE., APT. 2105
City-State-Zip: MIAMI FL 33129

Title MGRM
Name VELOSO, SALVADOR
Address 3930 NE 2ND AVE
200
City-State-Zip: MIAMI FL 33137

Title MGRM
Name MOGELOS, MARCELO
Address 1643 BRICKELL AVE., APT. 2105
City-State-Zip: MIAMI FL 33129

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SALVADOR VELOSO

OWNER / PARTNER

02/26/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date