

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000036909

**Entity Name:** OFRENDA FAMILIAR LLC

**Current Principal Place of Business:**

10700 NW 66 ST  
APT 407  
MIAMI, FL 33178

**Current Mailing Address:**

10700 NW 66 ST  
APT 407  
MIAMI, FL 33178

**FEI Number:** 26-2394624

**Certificate of Status Desired:** No

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

CRESPO, JOHN  
10700 NW 66 ST  
APT 407  
MIAMI, FL 33178 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 MGR  
Name CRESPO, JOHN  
Address 10700 NW 66 ST APT 407  
City-State-Zip: MIAMI FL 33178

Title MGR  
Name CRESPO, GRACIELA  
Address 10700 NW 66 ST APT 407  
City-State-Zip: MIAMI FL 33178

*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:** JOHN CRESPO

**MGR**

**03/02/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date