## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000039499

Entity Name: LATORO, LLC

**FILED** Apr 30, 2015 **Secretary of State** CC1805501646

## **Current Principal Place of Business:**

201 ALHAMBRA CIRCLE **SUITE 1200** CORAL GABLES, FL 33134

## **Current Mailing Address:**

201 ALHAMBRA CIRCLE **SUITE 1200** CORAL GABLES, FL 33134 US

FEI Number: 26-2451687 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

PIEDRA & ASSOCIATES, P.A. 201 ALHAMBRA CIRCLE **SUITE 1200** CORAL GABLES, FL 33134 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: JORGE L. PIEDRA 04/30/2015

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR Title MGR

Name PELLICCIOTTI, ANTONINO Name MARTINIELLO, ANGELINA

201 ALHAMBRA CIRCLE 201 ALHAMBRA CIRCLE Address Address

**SUITE 1200 SUITE 1200** 

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title MGR Title MGR

Name PELLICCIOTTI, CONSALVO Name PELLICCIOTTI, LAURA

Address 201 ALHAMBRA CIRCLE Address 201 ALHAMBRA CIRCLE

**SUITE 1200 SUITE 1200** 

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title MGR

PELLICCIOTTI, ROBERTO Name

201 ALHAMBRA CIRCLE Address

**SUITE 1200** 

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: ANTONINO PELLICCIOTTI

**MEMBER** 

04/30/2015