

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000026452

Entity Name: ACMA 10815 LLC

Current Principal Place of Business:

7400 NW 7TH ST
OFFICE # 204
MIAMI, FL 33126

Current Mailing Address:

7400 NW 7TH ST
OFFICE # 204
MIAMI, FL 33126

FEI Number: 26-4496027

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GONCALVES FRADE, ANTONIO
5825 COLLINS AVE
UNIT 5F
MIAMI BEACH, FL 33126 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 GONCALVES FRADE, ANTONIO
Address 5825 COLLINS AVE UNIT 5F
City-State-Zip: MIAMI BEACH FL 33140

Title MGRM
Name DASILVA DE GONCALVES, CELIA M
Address 5825 COLLINS AVE UNIT 5F
City-State-Zip: MIAMI BEACH FL 33140

Title MGRM
Name GONCALVES, ANA C
Address 5825 COLLINS AVE., UNIT 5F
City-State-Zip: MIAMI BEACH FL 33140

Title MGRM
Name GONCALVES, MIGUEL
Address 5825 COLLINS AVE., UNIT 5F
City-State-Zip: MIAMI BEACH FL 33140

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 GONCALVES FRADE

MGRM

01/13/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date