

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000083947

**FILED**  
**Jan 30, 2014**  
**Secretary of State**  
**CC7119409892**

**Entity Name:** STT OF AMERICA, LLC

**Current Principal Place of Business:**

50 MTS OESTE DE LA ESTACION DE BOMBEROS  
DE TIBAS  
SAN JOSE, COSTA RICA, XX XXXXX

**Current Mailing Address:**

50 MTS OESTE DE LA ESTACION DE BOMBEROS  
DE TIBAS  
SAN JOSE, COSTA RICA, XX XXXXX XX

**FEI Number:** 46-0523199

**Certificate of Status Desired:** Yes

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

A1A REGISTERED AGENT INC.  
5647 110TH AVENUE NORTH  
ROYAL PALM BEACH, FL 33411 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	Title	MGRM
Name	MORA, JEFFREY	Name	MORA, JOHANNY
Address	50 MTS OESTE DE LA ESTACION DE BOMBEROS	Address	50 MTS OESTE DE LA ESTACION DE BOMBEROS
City-State-Zip:	SAN JOSE, COSTA RICA XX XXXXX	City-State-Zip:	SAN JOSE, COSTA RICA XX XXXXX

*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:** JEFFREY MORA

**MGRM**

**01/30/2014**

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

\_\_\_\_\_  
Date