2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000085581

Entity Name: A SAPIENCE LLC

Current Principal Place of Business:

3245 NW 25TH TERRACE BOCA RATON, FL 33434

Current Mailing Address:

3245 NW 25TH TERRACE BOCA RATON, FL 33434 US

FEI Number: 27-0864455

Name and Address of Current Registered Agent:

RICHARD J. O'HARE PA 1550 MADRUGA AVENUE SUITE 120 CORAL GABLES, FL 33146 US FILED Apr 12, 2015 Secretary of State CC3186126554

Certificate of Status Desired: No

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

Authorized Person(s) Detail :

| Title | MGRM | Title | MGRM |
|-----------------|---|-----------------|----------------------------------|
| Name | ZELICO, NESTOR LUIS | Name | ZELICO, MARIA FELISA |
| Address | 3245 NW 25TH TERRACE | Address | 3245 NW 25TH TERRACE |
| City-State-Zip: | BOCA RATON FL 33434 | City-State-Zip: | BOCA RATON FL 33434 |
| | | | |
| | | | |
| Title | MGRM | Title | MGRM |
| Title Name | MGRM GIORGETTI, SANDRA SILVINA | Title Name | MGRM REBOREDO, RICARDO DANIEL |
| | | | |
| Name | GIORGETTI, SANDRA SILVINA 3245 NW 25TH TERRACE | Name | REBOREDO, RICARDO DANIEL |

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: ZELICO, NESTOR LUIS

MGR DIRECTOR

04/12/2015

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date