

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000054594

**Entity Name:** ATELIER CRUZ-DIEZ FLORIDE, LLC.

**Current Principal Place of Business:**

100 N BISCAYNE BLVD  
SUITE 500  
MIAMI, FL 33132

**Current Mailing Address:**

100 N BISCAYNE BLVD  
SUITE 500  
MIAMI, FL 33132 US

**FEI Number:** 42-1771484

**Certificate of Status Desired:** No

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

JADE ASSOCIATES MIAMI, INC  
100 N BISCAYNE BLVD  
SUITE 500  
MIAMI, FL 33132 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 ATELIER CRUZ-DIEZ S.A.R.L.  
Address 23 RUE PIERRE SEMARD  
City-State-Zip: PARIS 09 75009

*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:** ATELIER CRUZ-DIEZ S.A.R.L.

MGRM

04/30/2015

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

\_\_\_\_\_  
Date