

**2015 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L10000132411

**FILED**  
**Oct 28, 2015**  
**Secretary of State**  
**CC7773112631**

**Entity Name:** NCG FLORIDA CITY LLC

**Current Principal Place of Business:**

789 CRANDON BLVD.  
APT. 801  
KEY BISCAYNE, FL 33149

**Current Mailing Address:**

P.O. BOX 348130  
MIAMI, FL 33234 US

**FEI Number:** 45-2035055

**Certificate of Status Desired:** No

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

INTERAMERICAN CORPORATE SERVICES LLC  
2525 PONCE DE LEON BLVD.  
SUITE 1225  
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:** ALCIDES I. AVILA 10/28/2015  
Electronic Signature of Registered Agent Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	SANCHEZ LLORIA, MARGARITA	Name	FERNANDEZ-NESPRAL, DIONISIO
Address	789 CRANDON BLVD. APT. 801	Address	789 CRANDON BLVD. APT. 801
City-State-Zip:	KEY BISCAYNE FL 33149	City-State-Zip:	KEY BISCAYNE FL 33149
Title	MGR	Title	MANAGER
Name	FERNANDEZ-PEREZ, JAVIER	Name	PEREZ, XAVIER
Address	789 CRANDON BLVD. APT. 801	Address	789 CRANDON BLVD. APT. 801
City-State-Zip:	KEY BISCAYNE FL 33149	City-State-Zip:	KEY BISCAYNE FL 33149

*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:** MARGARITA SANCHEZ LLORIA 10/28/2015  
Electronic Signature of Signing Authorized Person(s) Detail Date