2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 10, 2017
Secretary of State
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Entity Name: BRICKMED, LLC

Current Principal Place of Business:

1800 SW 27 AVENUE
SUITE 505
MIAMI, FL 33145

Current Mailing Address:

1800 SW 27 AVENUE
SUITE 505
MIAMI, FL 33145

FEI Number: 65-0280009

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEGORBURU, PETER P
2476 SW 19TH TERRACE
MIAMI, FL 33145 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	MGR	Title	MGR
Name	LEGORBURU, PETER P	Name	MILLAS, ROLAND J
Address	2476 SW 19TH TERR	Address	11010 SW 163RD STREET
City-State-Zip:	MIAMI FL 33145	City-State-Zip:	MIAMI FL 33157

Title	MGR
Name	LAMBERT, JEWEL D
Address	2950 SW 3RD AVE APT 5E
City-State-Zip:	CORAL GABLES FL 33129

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: PETER P LEGORBURU MEMBER MANAGER 01/10/2017

Electronic Signature of Signing Authorized Person(s) Detail — Date