

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000093614

**Entity Name:** SOJOIP, L.L.C.

**Current Principal Place of Business:**

201 ALHAMBRA CIRCLE  
SUITE 504  
CORAL GABLES, FL 33134

**Current Mailing Address:**

201 ALHAMBRA CIRCLE  
SUITE 504  
CORAL GABLES, FL 33134 US

**FEI Number:** 33-1222018

**Certificate of Status Desired:** Yes

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

RODON AND ANDREU, P.L.  
201 ALHAMBRA CIRCLE  
SUITE 504  
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:** MARY LOU RODON

04/09/2014

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name HUBY, ALBERTO B  
Address CALLE 5 NRO. 170 URB INDUSTRIAL  
BOCANEGRA  
City-State-Zip: CALLAO- LIMA PU PERU

Title MGRM  
Name NORIEGA, ASUNCION A  
Address CALLE 5 NRO. 170 URB INDUSTRIAL  
BOCANEGRA  
City-State-Zip: CALLAO- LIMA PU PERU

*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:** ALBERTO HUBY

MGRM

04/09/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date