

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000125592

**Entity Name:** LASPRILLA & ALZATE LLC

**Current Principal Place of Business:**

1041 WATERSIDE CIR  
WESTON, FL 33327

**Current Mailing Address:**

1041 WATERSIDE CIR  
WESTON, FL 33327 UN

**FEI Number:** 45-3745966

**Certificate of Status Desired:** No

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

LASPRILLA, CARLOS EPRES  
1041 WATERSIDE CIR  
WESTON, FL 33327 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	PRES	Title	VPRE
Name	LASPRILLA, CARLOS	Name	ALZATE, LILIANA
Address	1041 WATERSIDE CIR	Address	10710 NW 66 ST APT 107
City-State-Zip:	WESTON FL 33327	City-State-Zip:	MIAMI FL 33178

*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:** CARLOS LASPRILLA

**PRES**

**04/10/2014**

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

\_\_\_\_\_  
Date