

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000056761

**Entity Name:** EMPOWER HOLDINGS, LLC

**Current Principal Place of Business:**

2990 PONCE DE LEON BLVD., SUITE 500  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2990 PONCE DE LEON BLVD.  
SUITE 500  
CORAL GABLES, FL 33143 US

**FEI Number:** 46-2894581

**Certificate of Status Desired:** No

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

MENDEZ, FRANCISCO J  
150 WEST FLAGLER STREET, SUITE 2200  
MIAMI, FL 33130 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 MAS, JUAN CARLOS  
Address 2990 PONCE DE LEON BLVD., SUITE  
500  
City-State-Zip: CORAL GABLES FL 33134

*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:** JUAN CARLOS MAS

MGRM

04/13/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date