## that my name appears above, or on an attachment with all other like empowered. SIGNATURE: GUSTAVO LANCEWICKI

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

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L12000078206

Entity Name: WAREHOUSE USO 2 LLC

### **Current Principal Place of Business:**

9990 NW 14TH STREET 105 MIAMI, FL 33172

# **Current Mailing Address:**

**9990 NW 14TH STREET** 105 MIAMI, FL 33172

## FEI Number: 46-1318398

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

LANCEWICKI, GUSTAVO 9990 NW 14TH STREET 105 MIAMI, FL 33172 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 Authorized Person(s) Detail : Title MRGM Title MGRM LANCEWICKI, GUSTAVO Name Name LANCEWICKI, CARINA 9990 NW 14TH STREET, STE 105 Address 9990 NW 14TH STREET, STE. 105 Address City-State-Zip: MIAMI FL 33172 City-State-Zip: MIAMI FL 33172

FILED Mar 19, 2015 Secretary of State CC7478148545

Certificate of Status Desired: No

03/19/2015 CEO

Date

Date