

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000016480

**Entity Name:** SOFI RETAILS, LLC

**Current Principal Place of Business:**

1110 BRICKELL AVENUE  
SUITE 505  
MIAMI, FL 33131

**FILED**  
**Feb 10, 2016**  
**Secretary of State**  
**CC3291436626**

**Current Mailing Address:**

1110 BRICKELL AVENUE  
SUITE 505  
MIAMI, FL 33131

**FEI Number:** 47-5205594

**Certificate of Status Desired:** No

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

PETER M. LOPEZ PA  
1911 NW 150 AVENUE  
SUITE 201  
PEMBROKE PINES, FL 33028 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  
Name DI LANZO, ROBERTO  
Address 1110 BRICKELL AVENUE, SUITE 505  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name GIUSTI, EMILIA  
Address 1110 BRICKELL AVENUE, SUITE 505  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name D'AGOSTINI, AMERICO  
Address 1110 BRICKELL AVENUE, SUITE 505  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name ALBANO, DOMENICO  
Address 1110 BRICKELL AVENUE, SUITE 505  
City-State-Zip: MIAMI FL 33131

*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: DOMENICO ALBANO**

**MGR**

**02/10/2016**

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

\_\_\_\_\_  
Date