

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000026753

**Entity Name:** ALDEA GROUP, LLC

**Current Principal Place of Business:**

201 S BISCAYNE BLVD  
STE 905  
MIAMI, FL 33131

**FILED**  
**Apr 01, 2014**  
**Secretary of State**  
**CC1435281312**

**Current Mailing Address:**

201 S BISCAYNE BLVD  
STE 905  
MIAMI, FL 33131 US

**FEI Number:** 46-8086805

**Certificate of Status Desired:** No

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

NEGOCIOS EN USA  
201 S BISCAYNE BLVD  
STE 905  
MIAMI, FL 33131 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 ALBA BARRIOS, LUIS E  
Address 201 S BISCAYNE BLVD, STE 905  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name DE AGUIAR, JOSE  
Address 201 S BISCAYNE BLVD, STE 905  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name RENDON BRICENO, ERLE J  
Address 201 S BISCAYNE BLVD STE 905  
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:** ALBA BARRIOS , LUIS E

**MANAGER**

**04/01/2014**

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

\_\_\_\_\_  
Date