

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000046787

**FILED  
Mar 26, 2015  
Secretary of State  
CC6703569168**

**Entity Name:** ALEJANDRO CUADRA GRAPHIC ARTS, LLC

**Current Principal Place of Business:**

C/O MUINOS & MORALES P.L.  
300 SEVILLA AVE STE309  
CORAL GABLES, FL 33134

**Current Mailing Address:**

C/O MUINOS & MORALES P.L.  
300 SEVILLA AVE STE309  
CORAL GABLES, FL 33134

**FEI Number:** 46-2444322

**Certificate of Status Desired:** No

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

MUINOS & MORALES P.L.  
300 SEVILLA AVENUE  
SUITE 309  
CORAL GABLES, FL 33134 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 CUADRA, ALEJANDRO R  
Address 300 SEVILLA AVE STE 309  
City-State-Zip: CORAL GABLES FL 33134

Title MGRM  
Name CUADRA, PATRICE I  
Address 300 SEVILLA AVENUE STE 309  
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:** ALEJANDRO CUADRA

**PRESIDENT**

**03/26/2015**

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

\_\_\_\_\_  
Date