

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000134008

**FILED**  
**Jan 14, 2015**  
**Secretary of State**  
**CC7346507635**

**Entity Name:** DORAL EB5 FINANCING AND MANAGEMENT LLC

**Current Principal Place of Business:**

201 SOUTH BISCAYNE BLVD.  
STE. 903  
MIAMI, FL 33131

**Current Mailing Address:**

201 SOUTH BISCAYNE BLVD.  
STE. 903  
MIAMI, FL 33131 US

**FEI Number:** 46-3960258

**Certificate of Status Desired:** No

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

MIAMI AGORA LLC  
201 SOUTH BISCAYNE BLVD.  
STE. 903  
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 MGRM  
Name MIAMI AGORA LLC  
Address 201 SOUTH BISCAYNE BLVD, STE.  
903  
City-State-Zip: MIAMI FL 33131

Title MGRM  
Name EPELSTAR LLC  
Address 201 SOUTH BISCAYNE BLVD, STE.  
903  
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:** RODRIGO AZPURUA

**MANAGING MEMBER**

**01/14/2015**

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

\_\_\_\_\_  
Date