

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000034240

**Entity Name:** QUINDI GOURMET LLC

**Current Principal Place of Business:**

11129 NW 122 STREET  
MEDLEY, FL 33178

**Current Mailing Address:**

11129 NW 122 STREET  
MEDLEY, FL 33178

**FEI Number: 46-4981004**

**Certificate of Status Desired: No**

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

MEDICI, FRANCESCO  
11129 NW 122 STREET  
MEDLEY, FL 33178 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           | AMBR                | Title           | AMBR                |
| Name            | BELLO, RICARDO E    | Name            | MEDICI, FRANCESCO   |
| Address         | 11129 NW 122 STREET | Address         | 11129 NW 122 STREET |
| City-State-Zip: | MEDLEY FL 33178     | City-State-Zip: | MEDLEY FL 33178     |

*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: RICARDO E BELLO**

**AMBR**

**03/03/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date