

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000057343

Entity Name: ALESSANDRA LOPES LLC

Current Principal Place of Business:

6100 TOSCANA DRIVE., #232
DAVIE, FL 33314

Current Mailing Address:

6100 TOSCANA DRIVE., #232
DAVIE, FL 33314 US

FEI Number: 46-5324842

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOPES, ALESSANDRA A MISS
6100 TOSCANA DRIVE
UNIT 232
DAVIE, FL 33314 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 MISS
Name LOPES, ALESSANDRA A MISS
Address 6100 TOSCANA DRIVE
UNIT 232
City-State-Zip: DAVIE FL 33314

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: ALESSANDRA A. LOPES

OWNER

01/12/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date