## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L14000057776

Entity Name: JULI & ANA LLC

## Current Principal Place of Business:

C/O FREDERICK WOODBRIDGE JR. P.A. 2655 S. LE JEUNE RD. STE 543 CORAL GABLES, FL 33134

## **Current Mailing Address:**

C/O FREDERICK WOODBRIDGE JR. P.A. 2655 S. LE JEUNE RD. STE 543 CORAL GABLES, FL 33134 US

## FEI Number: 35-2506148

# Name and Address of Current Registered Agent:

WOODBRIDGE, FREDERICK JR. C/O FREDERICK WOODBRIDGE JR. P.A. 2655 S. LE JEUNE RD. STE 543 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

#### Authorized Person(s) Detail :

Authorized Ferson(s) Detail .				
Title	AMBR	Title	AMBR	
Name	CHIARELLI, DIOGO	Name	CHIARELLI, JULIANA C	
Address	C/O FREDERICK WOODBRIDGE JR. P.A. 2655 S. LE JEUNE RD. STE 543	Address	C/O FREDERICK WOODBRIDGE JR. P.A. 2655 S. LE JEUNE RD. STE 543	
City-State-Zip:	CORAL GABLES FL 33134	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.

AMBR

# SIGNATURE: DIOGO CHIARELLI

Electronic Signature of Signing Authorized Person(s) Detail

## FILED Apr 30, 2017 Secretary of State CC4700986440

Certificate of Status Desired: No

04/30/2017 Date

Date