

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000154520

**Entity Name:** MARTA CASTILLO LLC

**Current Principal Place of Business:**

3503 WEST 89 PLACE  
HIALEAH, FL 33018

**FILED**  
**Apr 10, 2015**  
**Secretary of State**  
**CC4787514175**

**Current Mailing Address:**

3503 WEST 89 PLACE  
HIALEAH, FL 33018 US

**FEI Number:** 47-2248963

**Certificate of Status Desired:** No

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

CASTILLO, MARTA MRS  
3503 WEST 89 PLACE  
HIALEAH, FL 33018 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	MGR	Title	MGRM
Name	MARTA, CASTILLO C MRS.	Name	CASTILLO, JOSE LUIS
Address	3503 WEST 89 PLACE	Address	3503 WEST 89 PLACE
City-State-Zip:	MIAMI FL 33018	City-State-Zip:	HIALEAH FL 33018

*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:** JOSE LUIS CASTILLO

**MGRM**

**04/10/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date