

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000030960

**Entity Name:** CARIV MOTORS LLC

**Current Principal Place of Business:**

550 NW 79 ST  
MIAMI, FL 33150

**Current Mailing Address:**

555 NE 15 STREET  
SUITE 2 D  
MIAMI, FL 33132 US

**FEI Number:** 47-3165165

**Certificate of Status Desired:** No

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

TRANSACTION ADVISORS AND CONSULTANTS, LLC  
10261 SW 72ND STREET C 101  
MIAMI, FL 33173 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	CARO, AUDREA	Name	CARO, FELIPE
Address	555 NE 15 ST SUITE 2 D	Address	555 NE 15 ST SUITE 2 D
City-State-Zip:	MIAMI FL 33132	City-State-Zip:	MIAMI FL 33132
Title	AR		
Name	ARVESU, MANUEL		
Address	10261 SW 72ND STREET C 101		
City-State-Zip:	MIAMI FL 33173		

*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:** FELIPE CARO

**DIRECTOR**

**04/27/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date