

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000049755

**Entity Name:** BOTANICA VITA, LLC

**Current Principal Place of Business:**

405 SE 13TH STREET  
FT. LAUDERDALE, FL 33316

**Current Mailing Address:**

405 SE 13TH STREET  
FT. LAUDERDALE, FL 33316 US

**FEI Number:** 47-3594138

**Certificate of Status Desired:** No

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

FITZGERALD, SAMANTHA J ESQ.  
8551 W. SUNRISE BOULEVARD  
301  
PLANTATION, FL 33322 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  
Name BOYENGA, TRISTA  
Address 405 SE 13TH STREET  
City-State-Zip: FT. LAUDERDALE FL 33316

Title AMBR  
Name MARCELO, CLAUDIA  
Address 1761 NE 42ND ST  
City-State-Zip: FORT LAUDERDALE FL 33334

*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:** TRISTA BOYENGA

AMBR

04/28/2016

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date