

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000083904

Entity Name: COCOMEX LLC

Current Principal Place of Business:

18167 BISCAYNE BOULEVARD
AVENTURA, FL 33160

Current Mailing Address:

17100 NE 19TH AVE
#D1
NORTH MIAMI BEACH, FL 33162 US

FEI Number: 47-4031861

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, FRANK ESQ.
C/O FMS LAWYER PL
9900 STIRLING ROAD, SUITE 226
COOPER CITY, FL 33024 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
Name OIIVO, CESAR
Address 20140 N.E. 21ST COURT
City-State-Zip: NORTH MIAMI FL 33179

Title MGR
Name PEREZ, ADRIANA
Address 20140 N.E. 21ST COURT
City-State-Zip: NORTH MIAMI FL 33179

Title MGR
Name PEREZ, SAMUEL
Address 1127 ADAMS STREET
City-State-Zip: HOLLYWOOD FL 33019

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: ADRIANA PEREZ

MGR

02/15/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date