

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000124601

**Entity Name:** JOSEPA LLC

**Current Principal Place of Business:**

8004 NW 154 STREET  
117  
MIAMI LAKES, FL 33016

**Current Mailing Address:**

8004 NW 154 STREET  
117  
MIAMI LAKES, FL 33016 US

**FEI Number:** 81-3159075

**Certificate of Status Desired:** No

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

RESINO, RICARDO  
8004 NW 154 STREET  
117  
MIAMI LAKES, FL 33016 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 RESINO, RICARDO  
Address 8004 NW 154 STREET SUITE 117  
City-State-Zip: MIAMI LAKES FL 33016

Title AMBR  
Name NOVAS, JORGE E  
Address 8004 NW 154 STREET SUITE 117  
City-State-Zip: MIAMI LAKES FL 33016

Title AMBR  
Name NOVAS, JUAN P  
Address 8004 NW 154 STREET SUITE 117  
City-State-Zip: MIAMI LAKES FL 33016

Title AMBR  
Name NOVAS, MARIA C  
Address 8004 NW 154 STREET SUITE 117  
City-State-Zip: MIAMI LAKES FL 33016

Title MGR  
Name ORTEGA, FELIX G  
Address 8004 NW 154 STREET  
117  
City-State-Zip: MIAMI LAKES FL 33016

*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:** RICARDO RESINO

**MANAGER**

**04/10/2017**

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