## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000476267

Entity Name: EMIN USA LLC

**Current Principal Place of Business:** 

1200 PONCE DE LEON BLVD SUITE 703

CORAL GABLES, FL 33134

**Current Mailing Address:** 

1200 PONCE DE LEON BLVD SUITE 703 CORAL GABLES, FL 33134

FEI Number: 35-2735075 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARCELL FELIPE, P.A. 1200 PONCE DE LEON BLVD SUITE 703 CORAL GABLES, FL 33134 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

Authorized Person(s) Detail:

Title MGR Title MGR

Name HOEHMANN HEREDIA, ERWIN Name HOEHMANN FRERK, ERWIN

Address 1200 PONCE DE LEON BLVD, SUITE Address 1200 PONCE DE LEON BLVD, SUITE

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title MGR Title MGR

Name HOEHMANN HEREDIA, CRISTIAN Name MENZEL SIEBERT, CARLOS

Address 1200 PONCE DE LEON BLVD, SUITE Address 1200 PONCE DE LEON BLVD, SUITE

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title MGR Title MGR

Name MENZEL ARENAS, MATIAS Name LARENAS TORREALBA, RODRIGO

Address 1200 PONCE DE LEON BLVD, SUITE Address 1200 PONCE DE LEON BLVD, SUITE

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Date

FILED Apr 08, 2022

**Secretary of State** 

0412712766CC

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.