

M 98000001070
Vito-Marie L. Montano
Shaw Pittman Potts

Requestor's Name

2300 N Street, N.W.

Address

Washington, D.C. 20037-1128

City/State/Zip

Phone #

300002645113--5

-09/21/98--01130--003

****285.00 ****285.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☐ Walk in

☐ Pick up time _____

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

FILED
98 SEP 21 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NEW FILINGS	
☐	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/ Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

M 98-1070

Name Availability	OK 9-22
Document Examiner	OK
Updater	OK
Updater Verifier	OK
Acknowledgment	OK
W. P. Verifier	OK

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF
FLORIDA

1. Latin America Enterprise Fund Managers, L.L.C.
(Name of foreign limited liability company must end with the words "limited company" or their abbreviation "L.C." if not so contained in the name at present.)
2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 52-2112120
(FEI number, if applicable)
4. June 23, 1998
(Date of Organization)
5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. September 15, 1998
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. Grand Bay Plaza, 2665 South Bayshore Drive, Suite 1101, Coconut Grove, Florida 33133
(Street address of principal office)
8. List name, title, and business address of each managing member [MGRM] or manager [MGR] who will manage the foreign limited liability company in Florida: (attach additional page if necessary)

NAME & ADDRESS:

TITLE:

NAME & ADDRESS:

TITLE:

Pedro-Pablo Kuczynski
Grand Bay Plaza
2665 South Bayshore Dr., #1101
Coconut Grove, Florida 33133

Chairman of the
Board of Manager,
Chief Executive
Officer

Gerardo Sepulveda
Grand Bay Plaza
2665 South Bayshore Dr., #1101
Coconut Grove, Florida 33133

Managing Director
and Treasurer

mem

Eduardo Elejalde
Grand Bay Plaza
2665 South Bayshore Dr., #1101
Coconut Grove, Florida 33133

Managing Director
and Secretary

MEM

Fernando Montero
Grand Bay Plaza
2665 South Bayshore Dr., #1101
Coconut Grove, Florida 33133

Managing Director

mem

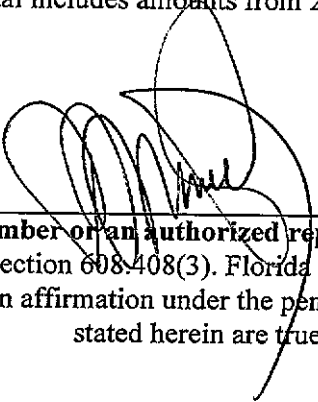
9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

FILED
98 SEP 21 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN
LIMITED LIABILITY COMPANY**

The undersigned member or authorized representative of a member of Latin America
Enterprise Fund Managers, L.L.C. certifies

- 1) the above named limited liability company has at least two members;
- 2) the total amount of cash contributed by the member(s) is \$ 1000
- 3) if any, the agreed value of property other than cash contributed by member(s) is
(A description of the property is attached and made a part hereto.)
and \$ 0
- 4) the total amount of cash and property contributed and anticipated to be
contributed by member(s) is (This total includes amounts from 2 and 3 above.) \$ 1000



Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this
affidavit constitutes an affirmation under the penalties of perjury that the facts
stated herein are true.)

Pedro-Pablo Kuczynski
Typed or printed name of signee

FILED
98 SEP 21 PM 4: 30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$250.00 for Application and Affidavit

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Latin America Enterprise Fund Managers, L.L.C.

2. The name and the Florida street address of the registered agent and office are:

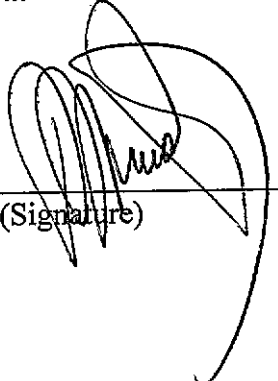
Pedro-Pablo Kuczynski
(Name)

Grand Bay Plaza, 2665 South Bayshore Drive, Suite 1101
Florida street address (P.O. Box NOT ACCEPTABLE)

Coconut Grove FL 33133
City/State/Zip

FILED
98 SEP 21 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Signature)

Filing Fee: \$35 for Designation of Registered Agent

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LATIN AMERICA ENTERPRISE FUND MANAGERS, L.L.C." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF SEPTEMBER, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

2900411 8300

981359819



Edward J. Freel 9305398
09-16-98
Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE:

File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999			FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
FILED 99 MAR 17 AM 8: 14 SECRETARY OF STATE TALLAHASSEE, FLORIDA				
FILING FEE \$ 188.75 Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE				
1. Name and Mailing Address of Limited Liability Company DOCUMENT # M98000001070 LATIN AMERICA ENTERPRISE FUND MANAGERS, L. L.C. 2665 SOUTH BAYSHORE DRIVE, SUITE 1101 GRAND BAY PLAZA COCONUT GROVE FL 33133			1a. Principal Place of Business Address 2665 SOUTH BAYSHORE DRIVE, S GRAND BAY PLAZA COCONUT GROVE FL 33133	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country		3. Date Organized or Qualified 09/21/1998 3a. State of Formation DE 4. FEI Number 52-2112120 ☐ Applied For ☐ Not Applicable 5. Date of Last Report 6. Certificate of Status Desired \$8.75 Additional Fee Required ☐
7. Name and Address of Current Registered Agent KUCZYNSKI, PEDRO-PABLO 2665 SOUTH BAYSHORE DRIVE, SUITE 110 GRAND BAY PLAZA COCONUT GROVE FL 33133			8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 900002820229 City 03/26/99-01068-015 ***188.75 ***188.75 FL Zip Code	
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations				
SIGNATURE _____ (Registered Agent Accepting Appointment to (NOTE: Registered Agent signature required for all entities of this type))			DATE _____	
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code
MGR	KUCZYNSKI, PEDRO-PABLO	2665 SOUTH BAYSHORE DRIVE,		COCONUT GROVE FL
MEM	ELEJALDE, EDUARDO	2665 SOUTH BAYSHORE DRIVE,		COCONUT GROVE FL
MEM	MONTERO, FERNANDO	2665 SOUTH BAYSHORE DRIVE,		COCONUT GROVE FL
MEM	SEPULVEDA, GERARDO	2665 SOUTH BAYSHORE DRIVE,		COCONUT GROVE FL
3-24-99				
11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address.				
SIGNATURE: <u>Eduardo Elejalde</u> EDUARDO ELEJALDE 3/12/99 305-285-4841 SIGNATURE AND TYPE OF OFFICIAL OFFICE OR COMPANY MANAGER, MEMBER OR MANAGER				

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M98000001070

1. Entity Name

LATIN AMERICA ENTERPRISE FUND MANAGERS, L.L.C.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB 17 AM 10:21

Principal Place of Business

2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE FL 33133

Mailing Address

2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE FL 33133-5448

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

52-2112120

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KUCZYNSKI, PEDRO-PABLO
2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE FL 33133

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE NAME ☐ Delete
MGR KUCZYNSKI, PEDRO-PABLO
STREET ADDRESS 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS *nf 2/28/00*
CITY-ST-ZIP

TITLE NAME ☐ Delete
MEM ELEJALDE, EDUARDO
STREET ADDRESS 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS 600003159556--8
CITY-ST-ZIP -03/07/00--01009--001
*****50.00 *****50.00

TITLE NAME ☐ Delete
MEM MONTERO, FERNANDO
STREET ADDRESS 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
MEM SEPULVEDA, GERARDO
STREET ADDRESS 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE:

(Signature)

Pedro Pablo Kuczynski

2/14/00

305-285-4841

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

CR2E083 (9/99)

0008942 AF

1. Entity Name
LATIN AMERICA ENTERPRISE FUND MANAGERS, L.L.C.

Mailing Address
2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE FL 33133

3. Mailing Address

Suite, Apt. #, etc.

City & State

Country

Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

7. Name and Address of New Registered Agent

Zip Code

SIGNATURE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

Make Check Payable to Department of State

10.

ADDITIONS/CHANGES
4000004000001
-04/27/01--01887.004 Addition
*****50.00 *****50.00

☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition

160407

Daytime Phone #

CR2E083 (11/00)

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90194 023 ****50.00

DOCUMENT # M98000001070

1. Entity Name

LATIN AMERICA ENTERPRISE FUND MANAGERS, L.L.C.

Principal Place of Business

2665 SOUTH BAYSHORE DRIVE, SUITE 1101
 GRAND BAY PLAZA
 COCONUT GROVE FL 33133

Mailing Address

2665 SOUTH BAYSHORE DRIVE, SUITE 1101
 GRAND BAY PLAZA
 COCONUT GROVE FL 33133

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **52-2112120**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KUCZYNSKI, PEDRO-PABLO
2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE FL 33133

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE ☐ Delete
 NAME **MGR**
 STREET ADDRESS **KUCZYNSKI, PEDRO-PABLO**
 CITY-ST-ZIP **2665 SOUTH BAYSHORE DRIVE, SUITE 1101**
COCONUT GROVE FL 33133

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **MEM**
 STREET ADDRESS **ELEJALDE, EDUARDO**
 CITY-ST-ZIP **2665 SOUTH BAYSHORE DRIVE, SUITE 1101**
COCONUT GROVE FL 33133

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **MEM**
 STREET ADDRESS **MONTERO, FERNANDO**
 CITY-ST-ZIP **2665 SOUTH BAYSHORE DRIVE, SUITE 1101**
COCONUT GROVE FL 33133

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **MEM**
 STREET ADDRESS **SEPULVEDA, GERARDO**
 CITY-ST-ZIP **2665 SOUTH BAYSHORE DRIVE, SUITE 1101**
COCONUT GROVE FL 33133

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE:

SIGNATURE REQUIRED

GERARDO R. SEPULVEDA

4/22/02

(305) 285-7995

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90004 044 ****50.00

DOCUMENT # M98000001070

1. Entity Name

LATIN AMERICA ENTERPRISE FUND MANAGERS, L.L.C.



Principal Place of Business

**2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE, FL 33133**

Mailing Address

**2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE FL 33133**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **52-2112120**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KUCZYNSKI, PEDRO-PABLO
2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE FL 33133**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003**

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE **MGR** ☐ Delete
NAME **KUCZYNSKI, PEDRO-PABLO**
STREET ADDRESS **2665 SOUTH BAYSHORE DRIVE, SUITE 1101**
CITY-ST-ZIP **COCONUT GROVE FL 33133**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **MEM** ☐ Delete
NAME **ELEJALDE, EDUARDO**
STREET ADDRESS **2665 SOUTH BAYSHORE DRIVE, SUITE 1101**
CITY-ST-ZIP **COCONUT GROVE FL 33133**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **MEM** ☐ Delete
NAME **MONTERO, FERNANDO**
STREET ADDRESS **2665 SOUTH BAYSHORE DRIVE, SUITE 1101**
CITY-ST-ZIP **COCONUT GROVE FL 33133**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **MEM** ☐ Delete
NAME **SEPULVEDA, GERARDO**
STREET ADDRESS **2665 SOUTH BAYSHORE DRIVE, SUITE 1101**
CITY-ST-ZIP **COCONUT GROVE FL 33133**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE:

SIGNATURE REQUIRED
Gerardo Sepulveda

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Feb 13/2003

Date

(305) 281-7995

Daytime Phone #

CR2E083 (10/02)

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001070

FILED
Jan 06, 2004
Secretary of State

Entity Name: LATIN AMERICA ENTERPRISE FUND MANAGERS, L.L.C.

Current Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 52-2112120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUCZYNSKI, PEDRO-PABLO
2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: KUCZYNSKI, PEDRO-PABLO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

Title: MEM () Delete
Name: ELEJALDE, EDUARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

Title: MEM () Delete
Name: MONTERO, FERNANDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

Title: MEM () Delete
Name: SEPULVEDA, GERARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KUCZYNSKI, PEDRO-PABLO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM (X) Change () Addition
Name: ELEJALDE, EDUARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM (X) Change () Addition
Name: MONTERO, FERNANDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM (X) Change () Addition
Name: SEPULVEDA, GERARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: PEDRO PABLO KUCZYNSKI

MGRM

01/06/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001070

FILED
Jan 06, 2005
Secretary of State

Entity Name: LATIN AMERICA ENTERPRISE FUND MANAGERS, L.L.C.

Current Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 52-2112120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUCZYNSKI, PEDRO-PABLO
2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: KUCZYNSKI, PEDRO-PABLO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM () Delete
Name: ELEJALDE, EDUARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM () Delete
Name: MONTERO, FERNANDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM () Delete
Name: SEPULVEDA, GERARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: GERARDO SEPULVEDA

MGRM

01/06/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001070

FILED
Jan 06, 2006
Secretary of State

Entity Name: LATIN AMERICA ENTERPRISE FUND MANAGERS, L.L.C.

Current Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 52-2112120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUCZYNSKI, PEDRO-PABLO
2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KUCZYNSKI, PEDRO-PABLO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM () Delete
Name: ELEJALDE, EDUARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM () Delete
Name: MONTERO, FERNANDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM () Delete
Name: SEPULVEDA, GERARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: GERARDO SEPULVEDA

MGRM

01/06/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001070

FILED
Feb 01, 2007
Secretary of State

Entity Name: LATIN AMERICA ENTERPRISE FUND MANAGERS, L.L.C.

Current Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

Current Mailing Address:

2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

New Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

New Mailing Address:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

FEI Number: 52-2112120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUCZYNSKI, PEDRO-PABLO
2665 SOUTH BAYSHORE DRIVE, SUITE 1101
GRAND BAY PLAZA
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

KUCZYNSKI, PEDRO-PABLO
2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133 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:

02/01/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KUCZYNSKI, PEDRO-PABLO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM () Delete
Name: ELEJALDE, EDUARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM () Delete
Name: MONTERO, FERNANDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM () Delete
Name: SEPULVEDA, GERARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 1101
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KUCZYNSKI, PEDRO-PABLO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM (X) Change () Addition
Name: ELEJALDE, EDUARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM (X) Change () Addition
Name: MONTERO, FERNANDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM (X) Change () Addition
Name: SEPULVEDA, GERARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: GERARDO SEPULVEDA

MGRM

02/01/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001070

FILED
Apr 16, 2008
Secretary of State

Entity Name: LATIN AMERICA ENTERPRISE FUND MANAGERS, L.L.C.

Current Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 52-2112120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUCZYNSKI, PEDRO-PABLO
2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KUCZYNSKI, PEDRO-PABLO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM () Delete
Name: ELEJALDE, EDUARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM () Delete
Name: MONTERO, FERNANDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM () Delete
Name: SEPULVEDA, GERARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: GERARDO SEPULVEDA

MGRM

04/16/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001070

FILED
Apr 16, 2009
Secretary of State

Entity Name: LATIN AMERICA ENTERPRISE FUND MANAGERS, L.L.C.

Current Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 52-2112120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUCZYNSKI, PEDRO-PABLO
2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KUCZYNSKI, PEDRO-PABLO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM () Delete
Name: ELEJALDE, EDUARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM () Delete
Name: MONTERO, FERNANDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM () Delete
Name: SEPULVEDA, GERARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: GERARDO SEPULVEDA

MGRM

04/16/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001070

FILED
Feb 18, 2010
Secretary of State

Entity Name: LATIN AMERICA ENTERPRISE FUND MANAGERS, L.L.C.

Current Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 52-2112120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUCZYNSKI, PEDRO-PABLO
2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: KUCZYNSKI, PEDRO-PABLO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM
Name: ELEJALDE, EDUARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM
Name: MONTERO, FERNANDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM
Name: SEPULVEDA, GERARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: GERARDO SEPULVEDA

MGRM

02/18/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001070

FILED
May 02, 2011
Secretary of State

Entity Name: LATIN AMERICA ENTERPRISE FUND MANAGERS, L.L.C.

Current Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 52-2112120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUCZYNSKI, PEDRO-PABLO
2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: KUCZYNSKI, PEDRO-PABLO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM
Name: ELEJALDE, EDUARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM
Name: MONTERO, FERNANDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM
Name: SEPULVEDA, GERARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: GERARDO SEPULVEDA

MGRM

05/02/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001070

FILED
Feb 07, 2012
Secretary of State

Entity Name: LATIN AMERICA ENTERPRISE FUND MANAGERS, L.L.C.

Current Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 52-2112120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUCZYNSKI, PEDRO-PABLO
2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: KUCZYNSKI, PEDRO-PABLO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM
Name: ELEJALDE, EDUARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM
Name: MONTERO, FERNANDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGRM
Name: SEPULVEDA, GERARDO
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 715
City-St-Zip: COCONUT GROVE, FL 33133

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: GERARDO SEPULVEDA

MGRM

02/07/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date

2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001070

Entity Name: LATIN AMERICA ENTERPRISE FUND MANAGERS, L.L.C.

Current Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

Current Mailing Address:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

FEI Number: 52-2112120

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KUCZYNSKI, PEDRO-PABLO
2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133 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 MGRM
Name KUCZYNSKI, PEDRO-PABLO
Address 2665 SOUTH BAYSHORE DRIVE,
SUITE 715
City-State-Zip: COCONUT GROVE FL 33133

Title MGRM
Name ELEJALDE, EDUARDO
Address 2665 SOUTH BAYSHORE DRIVE,
SUITE 715
City-State-Zip: COCONUT GROVE FL 33133

Title MGRM
Name MONTERO, FERNANDO
Address 2665 SOUTH BAYSHORE DRIVE,
SUITE 715
City-State-Zip: COCONUT GROVE FL 33133

Title MGRM
Name SEPULVEDA, GERARDO
Address 2665 SOUTH BAYSHORE DRIVE,
SUITE 715
City-State-Zip: COCONUT GROVE FL 33133

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GERARDO SEPULVEDA

MGRM

03/22/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001070

Entity Name: LATIN AMERICA ENTERPRISE FUND MANAGERS, L.L.C.

Current Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

Current Mailing Address:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

FEI Number: 52-2112120

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KUCZYNSKI, PEDRO-PABLO
2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133 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 MGRM
Name KUCZYNSKI, PEDRO-PABLO
Address 2665 SOUTH BAYSHORE DRIVE,
SUITE 715
City-State-Zip: COCONUT GROVE FL 33133

Title MGRM
Name ELEJALDE, EDUARDO
Address 2665 SOUTH BAYSHORE DRIVE,
SUITE 715
City-State-Zip: COCONUT GROVE FL 33133

Title MGRM
Name MONTERO, FERNANDO
Address 2665 SOUTH BAYSHORE DRIVE,
SUITE 715
City-State-Zip: COCONUT GROVE FL 33133

Title MGRM
Name SEPULVEDA, GERARDO
Address 2665 SOUTH BAYSHORE DRIVE,
SUITE 715
City-State-Zip: COCONUT GROVE FL 33133

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: GERARDO SEPULVEDA

MGRM

02/25/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001070

Entity Name: LATIN AMERICA ENTERPRISE FUND MANAGERS, L.L.C.

Current Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

Current Mailing Address:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

FEI Number: 52-2112120

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ELEJALDE, EDUARDO
2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133 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: EDUARDO ELEJALDE

04/28/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name ELEJALDE, EDUARDO
Address 2665 SOUTH BAYSHORE DRIVE,
SUITE 715
City-State-Zip: COCONUT GROVE FL 33133

Title MGRM
Name MONTERO, FERNANDO
Address 2665 SOUTH BAYSHORE DRIVE,
SUITE 715
City-State-Zip: COCONUT GROVE FL 33133

Title MGRM
Name SEPULVEDA, GERARDO
Address 2665 SOUTH BAYSHORE DRIVE,
SUITE 715
City-State-Zip: COCONUT GROVE FL 33133

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: GERARDO SEPULVEDA

MGRM

04/28/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date

2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001070

Entity Name: LATIN AMERICA ENTERPRISE FUND MANAGERS, L.L.C.

Current Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

Current Mailing Address:

2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133

FEI Number: 52-2112120

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ELEJALDE, EDUARDO
2665 SOUTH BAYSHORE DRIVE, SUITE 715
GRAND BAY PLAZA
COCONUT GROVE, FL 33133 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: EDUARDO ELEJALDE

04/29/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name ELEJALDE, EDUARDO
Address 2665 SOUTH BAYSHORE DRIVE,
SUITE 715
City-State-Zip: COCONUT GROVE FL 33133

Title MGRM
Name MONTERO, FERNANDO
Address 2665 SOUTH BAYSHORE DRIVE,
SUITE 715
City-State-Zip: COCONUT GROVE FL 33133

Title MGRM
Name SEPULVEDA, GERARDO
Address 2665 SOUTH BAYSHORE DRIVE,
SUITE 715
City-State-Zip: COCONUT GROVE FL 33133

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: GERARDO SEPULVEDA

MGRM

04/29/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date

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LATIN AMERICA ENTERPRISE FUND MANAGERS, L.L.C.					
<u>Filing Information</u>					
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2665 SOUTH BAYSHORE DRIVE, SUITE 715 GRAND BAY PLAZA COCONUT GROVE FL 33133					
Changed 02/01/2007					
<u>Mailing Address</u>					
2665 SOUTH BAYSHORE DRIVE, SUITE 715 GRAND BAY PLAZA COCONUT GROVE FL 33133					
Changed 02/01/2007					
<u>Registered Agent Name & Address</u>					
KUCZYNSKI, PEDRO-PABLO 2665 SOUTH BAYSHORE DRIVE, SUITE 715 GRAND BAY PLAZA COCONUT GROVE FL 33133 US					
Address Changed: 02/01/2007					
<u>Manager/Member Detail</u>					
Name & Address					
Title MGRM					
KUCZYNSKI, PEDRO-PABLO 2665 SOUTH BAYSHORE DRIVE, SUITE 715 COCONUT GROVE FL 33133					
Title MGRM					
ELEJALDE, EDUARDO 2665 SOUTH BAYSHORE DRIVE, SUITE 715 COCONUT GROVE FL 33133					
Title MGRM					
MONTERO, FERNANDO 2665 SOUTH BAYSHORE DRIVE, SUITE 715 COCONUT GROVE FL 33133					
Title MGRM					
SEPULVEDA, GERARDO 2665 SOUTH BAYSHORE DRIVE, SUITE 715 COCONUT GROVE FL 33133					

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Report Year Filed Date

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