

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000029124

**Entity Name:** LEOCAVA LLC

**Current Principal Place of Business:**

9534 NE 2 AVE  
MIAMI SHORES, FL 33138

**Current Mailing Address:**

PO BOX 381703  
MIAMI, FL 33238

**FEI Number:** 02-0651120

**Certificate of Status Desired:** No

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

LEONI, TODD  
7100 BISCAYNE BLVD  
206  
MIAMI, FL 33138 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 LEONI, TODD MMR  
Address 7100 BISCAYNE BLVD SUITE 206  
City-State-Zip: MIAMI FL 33138

Title MGR  
Name CAVA, RICHARD H  
Address 1865 BRICKELL AVE  
City-State-Zip: MIAMI FL 33129

*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:** TODD LEONI

**MANAGING MEMBER**

**04/01/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date