

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000046605

Entity Name: RICOVAIR, LLC

Current Principal Place of Business:

2365 NE 199 STREET
MIAMI, FL 33180

Current Mailing Address:

2365 NE 199 STREET
MIAMI, FL 33180 US

FEI Number: 20-1276111

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

YAFFE, CLAUDIA G
2365 NE 199 STREET
MIAMI, FL 33180 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 YAFFE, CLAUDIA GABRIELA
Address 2365 NE 199 STREET
City-State-Zip: MIAMI FL 33180

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: CLAUDIA GABRIELA YAFFE

AGENT

01/07/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date