

**2021 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:** Yes

**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

Title AUTHORIZED MEMBER  
Name RICOVER, ANDRES GUILLERMO SR.  
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 YAFFE

**AGENT**

**01/31/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date