

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000085081

**FILED**  
**Jan 27, 2023**  
**Secretary of State**  
**9398912123CC**

**Entity Name:** CLEANABILITY RESTORATION, LLC

**Current Principal Place of Business:**

13365 SW 135 AVE  
103  
MIAMI, FL 33186

**Current Mailing Address:**

PO BOX 960157  
MIAMI, FL 33296 US

**FEI Number:** 20-5493799

**Certificate of Status Desired:** No

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

RODRIGUEZ, WALTER  
13365 SW 135 AVE  
103  
MIAMI, FL 33186 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 RODRIGUEZ, WALTER  
Address 13365 SW 135 AVE  
103  
City-State-Zip: MIAMI FL 33186

Title MGR  
Name RODRIGUEZ, WALTER  
Address 13365 SW 135 AVE  
103  
City-State-Zip: MIAMI FL 33186

Title MGR  
Name SILVA, ARMANDO  
Address 13365 SW 135 AVE  
103  
City-State-Zip: MIAMI FL 33186

Title MGR  
Name PEREZ, JOSEPH  
Address 13365 SW 135 AVE  
103  
City-State-Zip: MIAMI FL 33186

*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:** JOSEPH PEREZ

**MGR**

**01/27/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date