

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000058576

Entity Name: TAWIL, LLC**Current Principal Place of Business:**1600 NE 1ST AVE
SUITE 3800
MIAMI, FL 33132**Current Mailing Address:**1600 NE 1ST AVE
SUITE 3800
MIAMI, FL 33132 US**FEI Number:** 26-2891437**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHOSHANI, NIR
1600 NE 1ST AVE
SUITE 3800
MIAMI, FL 33132 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	MANAGER, AUTHORIZED MEMBER
Name	TAWIL, MOISES ANDRES
Address	1600 NE 1ST AVE SUITE 3800
City-State-Zip:	MIAMI FL 33132

Title	MANAGER
Name	TAWIL, TOMAS EZEQUIEL
Address	1600 NE 1ST AVE SUITE 3800
City-State-Zip:	MIAMI FL 33132

Title	AUTHORIZED MEMBER
Name	PERELMAN, PATRICIA MIRTHA
Address	1600 NE 1ST AVE SUITE 3800
City-State-Zip:	MIAMI FL 33132

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: TOMAS TAWIL

MANAGER

04/18/2022

Electronic Signature of Signing Authorized Person(s) Detail_____
Date