

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000051259

Entity Name: RECOEN FLORIDA, LLC

Current Principal Place of Business:

3109 PONCE DE LEON BLVD
CORAL GABLES, FL 33134

Current Mailing Address:

3121 PONCE DE LEON BLVD
CORAL GABLES, FL 33134 US

FEI Number: 27-1763190

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GROSSFELD, KEVIN SESQ.
200 S BISCAYNE BLVD
SUITE 3600
MIAMI, FL 33131 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 CALTAGIRONE, GAETANO
Address C/O THE CALTA GROUP
3121 PONCE DE LEON BLVD
City-State-Zip: CORAL GABLES FL 33134

Title MGRM
Name GROSSFELD, KEVIN S
Address C/O RRRKLAW 20900 NE 30TH AVE,
#600
City-State-Zip: AVENTURA FL 33180

Title MGR
Name CALTAGIRONE, IGNAZIO
Address 3121 PONCE DE LEON BLVD
City-State-Zip: CORAL GABLES FL 33134

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: IGNAZIO CALTAGIRONE

MGR

02/26/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date