

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000100986

**Entity Name:** AIRESPLIT, LLC

**Current Principal Place of Business:**

2642 COLLINS AVE  
501  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

2642 COLLINS AVE  
501  
MIAMI BEACH, FL 33140 US

**FEI Number:** 36-4692011

**Certificate of Status Desired:** No

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

COTON, CARLOS D.  
1320 SW 91 AVE  
MIAMI, FL 33174 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:** CARLOS D. COTON

02/20/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name PEREZ, ANDRES  
Address 2642 COLLINS AVE  
501  
City-State-Zip: MIAMI BEACH FL 33140

Title MGRM  
Name PEREZ, MARIA L  
Address 2642 COLLINS AVE  
501  
City-State-Zip: MIAMI BEACH FL 33140

Title MGRM  
Name BADELL, ILIANA H  
Address 2642 COLLINS AVE  
501  
City-State-Zip: MIAMI BEACH FL 33140

*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:** ILIANA BADELL

MGRM

02/20/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date