

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000085548

**Entity Name:** RADAFASHIONS LLC

**Current Principal Place of Business:**

RADMILA GITELMAN  
17125 N BAY RD APT 3401  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

RADMILA GITELMAN  
17125 N BAY RD APT 3401  
SUNNY ISLES BEACH, FL 33160 US

**FEI Number:** 45-2835832

**Certificate of Status Desired:** No

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

GITELMAN, RADMILA  
2940 NE 188TH ST  
AVENTURA, 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 MGRM  
Name GITELMAN, RADMILA  
Address 17125 N BAY RD APT 3401  
City-State-Zip: SUNNY ISLES BEACH FL 33160

*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:** RADMILA GITELMAN

MGRM

02/12/2017

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

\_\_\_\_\_  
Date