

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000030571

**Entity Name:** SWEET GIFT, LLC

**Current Principal Place of Business:**

7700 N KENDALL DR  
# 405  
MIAMI, FL 33156

**Current Mailing Address:**

1211 HARDEE RD  
CORAL GABLES, FL 33146 US

**FEI Number:** 46-2202214

**Certificate of Status Desired:** No

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

MONROY, ABELARDO  
7700 N KENDALL DR  
# 405  
MIAMI, FL 33156 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            D  
Name            MONROY, ABELARDO  
Address        7700 N KENDALL DR - # 405  
City-State-Zip: MIAMI FL 33156

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:** ABELARDO MONROY

D

01/23/2018

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

\_\_\_\_\_  
Date