

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000192069

Entity Name: 2DOR GOURMET ICE LLC

Current Principal Place of Business:

9092 NW S RIVER DR
57
MIAMI, FL 33166

Current Mailing Address:

445 NW 4ST
APT#1010
MIAMI, FL 33128

FEI Number: 47-2977019

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FABIAN, ALVAREZ F SR
445 NW 4ST
APT#1010
MIAMI, FL 33128 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 | MGR | Title | MGR |
| Name | FABIAN, ALVAREZ F SR | Name | LIBIA, MARTINEZ L MS |
| Address | 7575 SW 60TH ST | Address | 7575 SW 60TH ST |
| City-State-Zip: | MIAMI FL 33143 | City-State-Zip: | MIAMI FL 33143 |
| | | | |
| Title | MGR | | |
| Name | LEAL, CARLOS MANUEL SR. | | |
| Address | 445 NW 4ST APT#1010 | | |
| City-State-Zip: | MIAMI FL 33128 | | |

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: CARLOS LEAL

MGR

04/11/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date