## 2018 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 US

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

**FILED** Mar 01, 2018

**Secretary of State** 

CC9260104884

Authorized Person(s) Detail:

Title Title MGR

Name FABIAN, ALVAREZ F SR Name LEAL, CARLOS MANUEL SR.

7575 SW 60TH ST 445 NW 4ST Address Address APT#1010

City-State-Zip: MIAMI FL 33143 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.

03/01/2018 SIGNATURE: CARLOS LEAL **PRESIDENT**