

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000063001

**Entity Name:** SE LOGER, LLC

**Current Principal Place of Business:**

970 NE 85 STREET  
MIAMI, FL 33138

**Current Mailing Address:**

970 NE 85 STREET  
MIAMI, FL 33138 US

**FEI Number:** 47-4115041

**Certificate of Status Desired:** No

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

LOGERAIS, PHILIPPE  
970 NE 85 STREET  
MIAMI, FL 33138 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            | LOGERAIS, PHILIPPE | Name            | LOGERAIS, HEATHER |
| Address         | 970 NE 85 STREET   | Address         | 970 NE 85 STREET  |
| City-State-Zip: | MIAMI FL 33138     | City-State-Zip: | MIAMI FL 33138    |

*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:** PHILIPPE LOGERAIS

MGR

07/12/2023

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

\_\_\_\_\_ Date