

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000078186

**Entity Name:** PALM ERA CLOTHING LLC**Current Principal Place of Business:**10323 NW 9TH ST. CIRCLE #2  
MIAMI, FL 33172**Current Mailing Address:**10323 NW 9TH ST. CIRCLE #2  
MIAMI, FL 33172 US**FEI Number:** 47-3918609**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RESTREPO, ANDRES  
10323 NW 9TH ST. CIRCLE #2  
MIAMI, FL 33172 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	MANAGER, DIRECTOR, PRESIDENT
Name	RESTREPO, ANDRES
Address	10323 NW 9TH ST. CIRCLE #2
City-State-Zip:	MIAMI FL 33172

Title	MANAGER
Name	CAMILO, JARAMILLO
Address	10323 NW 9TH ST. CIRCLE #2
City-State-Zip:	MIAMI FL 33172

Title	MANAGER
Name	SANTIAGO, JARAMILLO
Address	10323 NW 9TH ST. CIRCLE #2
City-State-Zip:	MIAMI FL 33172

Title	MANAGER
Name	JARAMILLO, GABRIEL JAIME
Address	10323 NW 9TH ST. CIRCLE #2
City-State-Zip:	MIAMI FL 33172

Title	MANAGER
Name	JARAMILLO, PATRICIA
Address	10323 NW 9TH ST. CIRCLE #2
City-State-Zip:	MIAMI FL 33172

*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:** ANDRES RESTREPO**DIRECTOR****03/10/2022**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date