

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000072154

Entity Name: IL LIQUORE, LLC

Current Principal Place of Business:

8400 NW 36TH ST
450
DORAL, FL 33166

Current Mailing Address:

8400 NW 36TH STREET
450
DORAL, FL 33166 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOPEZ, JONATHAN SR.
8400 NW 36 ST
SUITE 450
DORAL, FL 33166 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: JONATHAN LOPEZ

03/05/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	PLANCHART, ANDRES	Name	HOSPEDALES, MARIA GABRIELA
Address	8400 NW 36 ST SUITE 450	Address	8400 NW 36 ST SUITE 450
City-State-Zip:	DORAL FL 33166	City-State-Zip:	DORAL FL 33166

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: PLANCHART, ANDRES

MGR

03/05/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date