

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000119885

**Entity Name:** BOX DEAL LLC

**Current Principal Place of Business:**

3510 NW 115 AVE  
DORAL, FL 33178

**Current Mailing Address:**

7500 NW 25TH STREET  
246  
MIAMI, FL 33122 US

**FEI Number:** 32-0498830

**Certificate of Status Desired:** No

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

MOLINA, SURELY  
7500 NW 25TH STREET  
SUITE 246  
MIAMI, FL 33122 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           | AMBR                             |
| Name            | MAMONE, ESTEBAN M                | Name            | MAMONE, FRANCISCO F              |
| Address         | 7500 NW 25TH STREET<br>SUITE 246 | Address         | 7500 NW 25TH STREET<br>SUITE 246 |
| City-State-Zip: | MIAMI FL 33122                   | City-State-Zip: | MIAMI FL 33122                   |
| Title           | AMBR                             |                 |                                  |
| Name            | GITEL, MAURICIO G                |                 |                                  |
| Address         | 7500 NW 25TH STREET<br>SUITE 246 |                 |                                  |
| City-State-Zip: | MIAMI FL 33122                   |                 |                                  |

*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:** ESTEBAN M MAMONE

**MANAGER**

**04/11/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date