

2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L17000017098

Entity Name: MID 3-808, LLC**Current Principal Place of Business:**7825 NW 107TH AVE
APT 806
DORAL, FL 33178**Current Mailing Address:**7825 NW 107TH AVE
APT 806
DORAL, FL 33178 US**FEI Number:** 30-0967346**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VIZZI, CARMEN CRISTINA
7825 NW 107TH AVE
APT 806
DORAL, FL 33178 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:** CARMEN CRISTINA VIZZI

05/05/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR, AUTHORIZED MEMBER
Name VIZZI, CARMEN CRISTINA
Address 7825 NW 107TH AVE
APT 806
City-State-Zip: DORAL FL 33178

Title AUTHORIZED MEMBER
Name VIZZI, GIOVANNI
Address 7825 NW 107TH AVE
APT 806
City-State-Zip: DORAL FL 33178

Title AUTHORIZED MEMBER
Name DI FRISCO, CATERINA
Address 7825 NW 107TH AVE
APT 806
City-State-Zip: DORAL FL 33178

Title AUTHORIZED MEMBER
Name VIZZI, LILIANA
Address 7825 NW 107TH AVE
APT 806
City-State-Zip: DORAL FL 33178

Title AUTHORIZED MEMBER
Name VIZZI, ANGELO
Address 7825 NW 107TH AVE
APT 806
City-State-Zip: DORAL FL 33178

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: CARMEN CRISTINA VIZZI

MANAGER

05/05/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date