

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000047106

**Entity Name:** 3 SIBLINGS, LLC

**Current Principal Place of Business:**

6922 NW 179TH ST  
APT. 103  
HIALEAH, FL 33015

**FILED**  
**Apr 30, 2018**  
**Secretary of State**  
**CC1983930947**

**Current Mailing Address:**

6922 NW 179TH ST  
APT. 103  
HIALEAH, FL 33015 US

**FEI Number:** 82-0616665

**Certificate of Status Desired:** No

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

ESTEVEZ, ADHARA  
1215 NE 110TH ST  
MIAMI, FL 33161 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	RODRIGUEZ, ANDRES A	Name	DA CRUZ, LETICIA
Address	6922 NW 179TH ST APT. 103	Address	6922 NW 179TH ST APT. 103
City-State-Zip:	HIALEAH FL 33015	City-State-Zip:	HIALEAH FL 33015

*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 A RODRIGUEZ

**MBR**

**04/30/2018**

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

\_\_\_\_\_  
Date