

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000065047

Entity Name: CIBO SPECIALTY FOODSERVICE LLC**Current Principal Place of Business:**6995 NW 82ND AVE
BAY 33
MIAMI, FL 33166**Current Mailing Address:**6995 NW 82ND AVE
BAY 33
MIAMI, FL 33166 US**FEI Number: APPLIED FOR****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CINOTTI LLP
66 WEST FLAGLER STREET, 1002
MIAMI, FL 33130 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 AUTHORIZED REPRESENTATIVE
Name COLAVITA USA, L.L.C.
Address 1 RUNYONS LN
City-State-Zip: EDISON NJ 08817

Title COO
Name DI FABIO, STEFANO
Address 6995 NW 82ND AVE
BAY 33
City-State-Zip: MIAMI FL 33166

Title MANAGER
Name DI FABIO, MARCO
Address 6995 NW 82ND AVE
BAY 33
City-State-Zip: MIAMI FL 33166

Title AUTHORIZED REPRESENTATIVE
Name JIMENEZ, JESUS JOSE
Address 6995 NW 82ND AVE
BAY 33
City-State-Zip: MIAMI 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: STEFANO DI FABIO**COO****01/13/2020**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date