

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000114048

**Entity Name:** RYF & CIA LLC

**Current Principal Place of Business:**

19201 COLLINS AVE.  
819  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

19201 COLLINS AVE.  
819  
SUNNY ISLES BEACH, FL 33160

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

DD CORPORATE SERVICES  
2999 NE 191 STREET  
805  
AVENTURA, FL 33180 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            AMBR  
Name            KATZ, JAVIER  
Address        19201 COLLINS AVE., 1031  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title            AMBR  
Name            CASTELLANO, MAGDALENA  
Address        19201 COLLINS AVE. 1031  
City-State-Zip: SUNNY ISLES BEACH FL 33160

*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:** JAVIER KATZ

**PRESIDENT**

**04/24/2018**

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

\_\_\_\_\_  
Date