### 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000292175

Entity Name: MADAME DISTRIBUTION LLC

**Current Principal Place of Business:** 

2230 SW 70TH AVE SUITE 5 DAVIE, FL 33317

## **Current Mailing Address:**

5961 N FALLS CIR DR 104 LAUDERHILL, FL 33319 US

## FEI Number: 83-2984453

### Name and Address of Current Registered Agent:

ELIE, ANNE MELISSA 5961 N FALLS CIR DR 104 LAUDERHILL, FL 33319 US Certificate of Status Desired: No

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

### Authorized Person(s) Detail :

|  | Title           | CEO                         | Title           | СТО                         |
|--|-----------------|-----------------------------|-----------------|-----------------------------|
|  | Name            | ELIE, ANNE MELISSA          | Name            | LHERISSON, MANARUM          |
|  | Address         | 5961 N FALLS CIR DR #104    | Address         | 2128 SW 151ST AVE           |
|  | City-State-Zip: | LAUDERHILL FL 33319         | City-State-Zip: | MIRAMAR FL 33027            |
|  | Title           | соо                         | Title           | AMBR                        |
|  | Name            | VILUS, DANIEL               | Name            | PIERRE, GREGORY             |
|  | Address         | 101 NW 105TH ST             | Address         | 2230 SW 70TH AVE<br>SUITE 5 |
|  | City-State-Zip: | MIAMI SHORES FL 33150       | City-State-Zip: | DAVIE FL 33317              |
|  | Title           | AMBR                        | Title           | AMBR                        |
|  | Name            | PROPHETE, MAGGALIE          | Name            | ELIE, GREGORY               |
|  | Address         | 2230 SW 70TH AVE<br>SUITE 5 | Address         | 2230 SW 70TH AVE<br>SUITE 5 |
|  | City-State-Zip: | DAVIE FL 33317              | City-State-Zip: | DAVIE FL 33317              |
|  |                 |                             |                 |                             |

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.

CEO

#### SIGNATURE: ELIE, ANNE MELISSA

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Jan 15, 2022 Secretary of State 6423836980CC

Date

01/15/2022

Date