

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000144432

**Entity Name:** SOCIETE RAQUEVILLE US LLC

**Current Principal Place of Business:**

1851 NW 123RD AVE  
SUITE # 555 S  
PEMBROKE, FL 33026

**Current Mailing Address:**

4429 HOLLYWOOD BLVD  
SUITE # 814360  
HOLLYWOOD, FL 33081 US

**FEI Number:** 84-2047304

**Certificate of Status Desired:** Yes

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

POVEDANO ASSOCIATES LLC  
4000 HOLLYWOOD BLVD  
SUITE 555 SOUTH  
HOLLYWOOD, FL 33021 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 SUAREZ, DAVID  
Address 4429 HOLLYWOOD BLVD  
SUITE # 814360  
City-State-Zip: HOLLYWOOD FL 33081

Title AMBR  
Name JUKISZ, JESSENIA  
Address 4429 HOLLYWOOD BLVD  
SUITE # 814360  
City-State-Zip: HOLLYWOOD FL 33081

Title AMBR  
Name JUKISZ, NATHALIE  
Address 4429 HOLLYWOOD BLVD  
SUITE # 814360  
City-State-Zip: HOLLYWOOD FL 33081

*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:** SUAREZ DAVID

AMBR

04/12/2021

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

\_\_\_\_\_  
Date