

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000164836

**Entity Name:** EL GATO SDR, LLC

**Current Principal Place of Business:**

8850 WEST FLAGLER STREET  
UNIT 15  
MIAMI, FL 33174

**Current Mailing Address:**

615 WEST FAIRFIELD COURT  
GLENDALE, WI 53217 US

**FEI Number:** 84-2310106

**Certificate of Status Desired:** Yes

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

FILE FLORIDA CO.  
7021 UNIVERSITY BLVD  
WINTER PARK, FL 32792 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:** BRIAN DAVIS

02/07/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                          |                 |                           |
|-----------------|--------------------------|-----------------|---------------------------|
| Title           | AR/ MANAGER              | Title           | AUTHORIZED REPRESENTATIVE |
| Name            | VASQUEZ, GABRIELA A      | Name            | KONDRICK, CY              |
| Address         | 615 WEST FAIRFIELD COURT | Address         | 615 WEST FAIRFIELD COURT  |
| City-State-Zip: | GLENDALE WI 53217        | City-State-Zip: | GLENDALE WI 53217         |

*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:** VASQUEZ, GABRIELA A

**OWNER / AUTHORIZED  
REPRESENTATIVE**

02/07/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date