

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000240127

**Entity Name:** REINALDO PADRON LLC

**Current Principal Place of Business:**

455 NE 39 ST  
UNIT 313  
MIAMI, FL 33137

**Current Mailing Address:**

455 NE 39 ST  
UNIT 313  
MIAMI, FL 33137 UN

**FEI Number:** 85-2887388

**Certificate of Status Desired:** No

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

PADRON, REINALDO  
455 NE 39 ST UNIT 313  
MIAMI, FL 33137 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           MANAGER  
Name           PADRON, REINALDO  
Address        455 NE 39 ST UNIT 313  
City-State-Zip: MIAMI FL 33137

*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:** REINALDO PADRON

**MANAGER**

**04/24/2023**

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

\_\_\_\_\_  
Date