

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000376662

**Entity Name:** SARARI GROUP LLC

**Current Principal Place of Business:**

15390 SW 20 ST  
MIAMI, FL 33185

**Current Mailing Address:**

15390 SW 20 ST  
MIAMI, FL 33185 US

**FEI Number:** 35-2700905

**Certificate of Status Desired:** Yes

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

COLINA, ENRIQUE L  
15390 SW 20 ST.  
MIAMI, FL 33185 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 MGR  
Name SARARI BIENES RAICES SA DE CV  
Address PASEO DE LOS LAURELES 458/403A,  
BOSQUE DE  
City-State-Zip: DE LAS LOMAS, CP: 11700 MC 11700

Title MGR  
Name SAADIA GITLIN, ARI  
Address PASEO DE LOS LAURELES 458 ,  
BOSQUE DE LAS  
City-State-Zip: DE LAS LOMAS, CP:11700 #403A MC  
11700

Title MGR  
Name DICKTER COHEN, SARA  
Address PASEO DE LOS LAURELES 458 ,  
BOSQUE DE LAS  
City-State-Zip: DE LAS LOMAS, CP:11700 #403A MC  
11700

*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:** DICKTER COHEN , SARA

**MANAGER**

**04/14/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date