

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000087905

**Entity Name:** SOBE SEA, LLC

**Current Principal Place of Business:**

10295 COLLINS AVENUE  
2ND FLOOR  
BAL HARBOUR, FL 33154

**Current Mailing Address:**

10295 COLLINS AVENUE  
2ND FLOOR  
BAL HARBOUR, FL 33154

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

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

GRANDA, JAVIER A  
10295 COLLINS AVENUE  
2ND FLOOR  
BAL HARBOUR, FL 33154 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 KANAVOS, PAUL C  
Address 10295 COLLINS AVENUE, 2ND FLOOR  
City-State-Zip: BAL HARBOUR FL 33154

Title MGR  
Name KANAVOS, DAYSSI O  
Address 10295 COLLINS AVENUE, 2ND FLOOR  
City-State-Zip: BAL HARBOUR FL 33154

Title MGR  
Name GRANDA, JAVIER A  
Address 10295 COLLINS AVENUE, 2ND FLOOR  
City-State-Zip: BAL HARBOUR FL 33154

Title MGR  
Name LOWENSTEIN, DIEGO  
Address 10295 COLLINS AVENUE, 2ND FLOOR  
City-State-Zip: BAL HARBOUR FL 33154

Title MGR  
Name BEN-JOSEF, RON  
Address 10295 COLLINS AVENUE, 2ND FLOOR  
City-State-Zip: BAL HARBOUR FL 33154

Title MGR  
Name BEN-JOSEF, RONEN  
Address 10295 COLLINS AVENUE, 2ND FLOOR  
City-State-Zip: BAL HARBOUR FL 33154

*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:** RONEN BEN-JOSEF

**MANAGER**

**04/13/2022**

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

\_\_\_\_\_  
Date