

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000084696

**Entity Name:** SKLADIK LLC

**Current Principal Place of Business:**

2486 HARBOUR COVE DR  
HUTCHINSON ISLAND, FL 34939

**Current Mailing Address:**

2486 HARBOUR COVE DR  
HUTCHINSON ISLAND, FL 34939 US

**FEI Number:** 88-1057235

**Certificate of Status Desired:** No

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

SHARGO, ALEXANDER  
2486 HARBOUR COVE DR  
HUTCHINSON ISLAND, FL 34939 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 SHARGO, ALEXANDER  
Address 19651 GULF BLVD A12  
City-State-Zip: INDIAN SHORES FL 33785

Title AMBR  
Name KHOLIEV, JAMSHED  
Address 3280 ROCKPORT ST SW  
City-State-Zip: VERO BEACH FL 32968

Title AMBR  
Name SHPIGEL, ALEXANDER  
Address 12637 WATERSPROUT CT  
City-State-Zip: OWNINGS MILLS MD 21117

*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:** ALEXANDER SHARGO

**MANAGER**

**02/07/2024**

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

\_\_\_\_\_  
Date