ZAMIN, JUAN 7264 SW 8TH MIAMI, FL 33	I ST			
The above nam	ned entity submits this statement for the purpose of char	nging its registered office or re	gistered agent, or both, in the State of F	lorida.
SIGNATUF	RE: JUAN PABLO ZAMIN	l		04/30/2024
	Electronic Signature of Registered Agent			Date
Authorized	d Person(s) Detail :			
Title	MGR	Title	AMBR	
Name	CESAR ZAMIN, JUAN PABLO	Name	FABIANA NAZZARO, MARIA	
Address	JUNIN 915, BOULOGNE	Address	JUNIN 915, BOULOGNE	

**Current Mailing Address:** 

7264 SW 8TH ST MIAMI, FL 33144

MIAMI, FL 33144 US

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

Entity Name: SKILLBOX COMPANY LLC

**Current Principal Place of Business:** 

# 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: CESAR ZAMIN, JUAN PABLO

MGR

04/30/2024

7264 SW 8TH ST

### FEI Number: 88-2322340

City-State-Zip: BUENOS AIRES AR 1609

### 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L22000199463

Electronic Signature of Signing Authorized Person(s) Detail

Date

## FILED Apr 30, 2024 Secretary of State 2871264997CC

Certificate of Status Desired: No

City-State-Zip: BUENOS AIRES AR 1609