

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000299417

Entity Name: CORTADITO KIOSK LLC

Current Principal Place of Business:

40 SW 13 ST STE 301
MIAMI, FL 33130

Current Mailing Address:

212 PONCE DE LEON BLVD STE 1050
CORAL GABLES, FL 33134

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONSULTING SERVICES OF SOUTH FLORIDA INC
2121 PONCE DE LEON BLVD STE 1050
CORAL GABLES, FL 33134 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 MGRM
Name JOCOBO, JOSE
Address 2121 PONCE DE LEON BLVD STE 1050
City-State-Zip: CORAL GABLES FL 33134

Title MGRM
Name DIB, JAMIL
Address 2121 PONCE DE LEON BLVD STE 1050
City-State-Zip: CORAL GABLES FL 33134

Title MGRM
Name ARAOZ, EDUARDO
Address 2121 PONCE DE LEON BLVD STE 1050
City-State-Zip: CORAL GABLES FL 33134

Title MGR
Name HURTADO, HECTOR
Address 2121 PONCE DE LEON BLVD STE 1050
City-State-Zip: CORAL GABLES FL 33134

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: JOCOBO , JOSE

MGRM

04/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date