

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M13000005527

**Entity Name:** SOUTHWEST FOODSERVICE EXCELLENCE, LLC

**Current Principal Place of Business:**

9366 E RAINTREE DRIVE  
SUITE 101  
SCOTTSDALE, AZ 85260

**Current Mailing Address:**

9366 E RAINTREE DRIVE  
SUITE 101  
SCOTTSDALE, AZ 85260 US

**FEI Number:** 20-1746104

**Certificate of Status Desired:** No

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

COGENCY GLOBAL INC.  
115 NORTH CALHOUN ST.  
SUITE 4  
TALLAHASSEE, FL 32301 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           DIRECTOR AND OFFICER  
Name           BENAVIDES, LUIS  
Address        9366 E. RAINTREE DRIVE  
                  SUITE 101  
City-State-Zip: SCOTTSDALE AZ 85260

Title           OWNER  
Name           SFE INTERMEDIATE HOLDCO LLC  
Address        9366 E. RAINTREE DRIVE  
                  SUITE 101  
City-State-Zip: SCOTTSDALE AZ 85260

Title           MANAGER, DIRECTOR  
Name           GALA, DON  
Address        9366 E RAINTREE DRIVE  
                  SUITE 101  
City-State-Zip: SCOTTSDALE AZ 85260

*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:** DON GALA

**DIRECTOR, MANAGER**

**04/28/2021**

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

\_\_\_\_\_  
Date