

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000008444

**Entity Name:** SOCIO ACCOMANDATARIO DUE INC.

**Current Principal Place of Business:**

400 CLEMATIS STREET  
SUITE 209  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

400 CLEMATIS STREET  
SUITE 209  
WEST PALM BEACH, FL 33401 US

**FEI Number:** 81-1317332

**Certificate of Status Desired:** No

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

HERBST, TODD  
400 CLEMATIS STREET  
SUITE 205  
WEST PALM BEACH, FL 33401 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

**Officer/Director Detail :**

Title            D, P  
Name            HERBST, TODD  
Address        400 CLEMATIS STREET, SUITE 205  
City-State-Zip: WEST PALM BEACH FL 33401

Title            S  
Name            WATSON, WILLIAM  
Address        400 CLEMATIS STREET  
                  SUITE 205  
City-State-Zip: WEST PALM BEACH FL 33401

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TODD HERBST

**PARTNER**

**03/08/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date