

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000081852

Entity Name: QUADRIFOIL HOLDINGS, LLC**Current Principal Place of Business:**765 NW 155 TERRACE
PEMBROKE PINES, FL 33028**Current Mailing Address:**19200 PINES BLVD.
PEMBROKE PINES, FL 33029 US**FEI Number:** 20-4709747**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BENITEZ, DANIEL
19200 PINES BLVD
PEMBROKE PINES, FL 33029 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 | P |
| Name | BENITEZ, DANIEL |
| Address | 765 NW 155 TERRACE |
| City-State-Zip: | PEMBROKE PINES FL 33028 |

| | |
|-----------------|-------------------------|
| Title | VP |
| Name | BENITEZ, MONICA G |
| Address | 765 NW 155 TERRACE |
| City-State-Zip: | PEMBROKE PINES FL 33028 |

| | |
|-----------------|-------------------------|
| Title | D |
| Name | BENITEZ, PABLO DANIEL |
| Address | 765 NW 155 TERRACE |
| City-State-Zip: | PEMBROKE PINES FL 33028 |

| | |
|-----------------|---------------------------|
| Title | D |
| Name | BENITEZ, CHRISTIAN DANIEL |
| Address | 765 NW 155 TERRACE |
| City-State-Zip: | PEMBROKE PINES FL 33028 |

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: DANIEL BENITEZ

P

01/11/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date