

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000038656

Entity Name: SERVICES AND PROMOTIONS MIAMI LLC

Current Principal Place of Business:

ATTENTION: ANTONIO COVAS OR LINDA MENDIVIL
1401 BRICKELL AVENUE, SUITE 810
MIAMI, FL 33131

Current Mailing Address:

ATTENTION: ANTONIO COVAS OR LINDA MENDIVIL
1401 BRICKELL AVENUE, SUITE 810
MIAMI, FL 33131 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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: JON-MICHAEL SANCHEZ, SPECIAL SECRETARY

04/12/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title: MANAGER
Name: AYA, MANUEL
Address: ATTENTION: ANTONIO COVAS OR LINDA MENDIVIL
1401 BRICKELL AVENUE, SUITE 810
City-State-Zip: MIAMI FL 33131

Title: MANAGER
Name: MALDONADO, JAVIER
Address: ATTENTION: ANTONIO COVAS OR LINDA MENDIVIL
1401 BRICKELL AVENUE, SUITE 810
City-State-Zip: MIAMI FL 33131

Title: MANAGER
Name: PEREZ, MIRIAM
Address: ATTENTION: ANTONIO COVAS OR LINDA MENDIVIL
1401 BRICKELL AVENUE, SUITE 810
City-State-Zip: MIAMI FL 33131

Title: MANAGER
Name: COVAS, ANTONIO JULIO CORREIA LEITE PORTAL
Address: ATTENTION: ANTONIO COVAS OR LINDA MENDIVIL
1401 BRICKELL AVENUE, SUITE 810
City-State-Zip: MIAMI FL 33131

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: MANUEL AYA

**MANAGER, BY JON-MICHAEL SANCHEZ,
ATTORNEY-IN-FACT**

04/12/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

