

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000050271

**Entity Name:** DOLIMMO, LLC

**Current Principal Place of Business:**

19999 E COUNTRY CLUB DR UNIT 1-202  
AVENTURA, FL 33180

**Current Mailing Address:**

PO BOX 450474  
SUNRISE, FL 33345-0474 US

**FEI Number:** 45-2040955

**Certificate of Status Desired:** No

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

STROCK & COHEN, ZIPPER LAW GROUP, P.A.  
2900 GLADES CIR STE 750  
WESTON, FL 33327 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:** JULIE GONZALEZ COHEN

04/25/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           DOLIGNON, ARNAUD  
Address        9 AVENUE LE MESNIL  
City-State-Zip: NICE 06200

*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:** DOLIGNON , ARNAUD

MANAGER

04/25/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date