

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000047778

**Entity Name:** SOUTH BEACH HOLIDAY, LLC

**Current Principal Place of Business:**

8135 ABBOTT AVENUE  
1  
MIAMI BEACH, FL 33141

**FILED**  
**Apr 17, 2024**  
**Secretary of State**  
**0710503320CC**

**Current Mailing Address:**

230 174TH STREET  
1514  
SUNNY ISLES BEACH, FL 33160 US

**FEI Number: 47-3263633**

**Certificate of Status Desired: No**

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

ZARFATI, MARCO  
230 174TH STREET  
1514  
SUNNY ISLES BEACH, FL 33160 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 MGRM  
Name ZARFATI, MARCO  
Address 230 174TH STREET #1514  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title MGR  
Name ZARFATI, MADELEINE NICOLE  
Address 230 174TH STREET  
1514  
City-State-Zip: SUNNY ISLES BEACH FL 33160

*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: MARCO ZARFATI**

**MGRM**

**04/17/2024**

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

\_\_\_\_\_  
Date