

2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L17000079110

Entity Name: DESIGNED TASTE, LLC**Current Principal Place of Business:**3645 FRANKLIN AVENUE
MIAMI, FL 33133**Current Mailing Address:**3645 FRANKLIN AVENUE
MIAMI, FL 33133 US**FEI Number:** 82-1126744**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LEE, TANICE D
3645 FRANKLIN AVENUE
MIAMI, FL 33133 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:** TANICE LEE

04/23/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	OWNER	Title	AUTHORIZED REPRESENTATIVE
Name	LEE, TANICE D	Name	DUKES, RONAIYA T
Address	3645 FRANKLIN AVENUE	Address	3645 FRANKLIN AVENUE
City-State-Zip:	MIAMI FL 33133	City-State-Zip:	MIAMI FL 33133
Title	AUTHORIZED REPRESENTATIVE	Title	AUTHORIZED REPRESENTATIVE
Name	D, SHAMAIRA R	Name	DUKES, LERON Y
Address	3645 FRANKLIN AVENUE	Address	3645 FRANKLIN AVENUE
City-State-Zip:	MIAMI FL 33133	City-State-Zip:	MIAMI FL 33133
Title	AUTHORIZED REPRESENTATIVE		
Name	DUKES, RIYANNA D		
Address	3645 FRANKLIN AVENUE		
City-State-Zip:	MIAMI FL 33133		

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: TANICE LEE

OWNER

04/23/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date