

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000082858

Entity Name: DESIGNIT FLORIDA LLC**Current Principal Place of Business:**4102 PONCE DE LEON
CORAL GABLES, FL 33146**Current Mailing Address:**4102 PONCE DE LEON
CORAL GABLES, FL 33146 US**FEI Number:** 82-1234184**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**RECALDE LAW FIRM, P.A.
RECALDE LAW FIRM PA
1815 PURDY AVE 2ND FLOOR
MIAMI BEACH, FL 33139 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:** RAFAEL RECALDE

03/05/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR
Name	SALINAS, EDMUNDO
Address	4102 PONCE DE LEON
City-State-Zip:	CORAL GABLES FL 33146

Title	MGR
Name	LASHERAS, MANUEL
Address	4102 PONCE DE LEON
City-State-Zip:	CORAL GABLES FL 33146

Title	AUTHORIZED REPRESENTATIVE
Name	ZAVATTI AZZATO, VALERIA
Address	1010 BRICKELL AVENUE UNIT 2804
City-State-Zip:	MIAMI FL 33131

Title	AUTHORIZED REPRESENTATIVE
Name	GONZALEZ PARDO, JORGE LUIS
Address	3300 S DIXIE HWY
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: MANUEL ALEJANDRO LASHERAS LOPEZ

03/05/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date