

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000149412

Entity Name: 83-85 S LLC**Current Principal Place of Business:**83 W 8 ST
HIALEAH, FL 33010**Current Mailing Address:**19500 E SAINT ANDREWS DR
HIALEAH, FL 33015 US**FEI Number:** 82-2138277**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SOSA, SUMEY
19500 E SAINT ANDREWS DR
HIALEAH, FL 33015 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	AMBR
Name	SOSA, SUMEY
Address	19500 E SAINT ANDREWS DR
City-State-Zip:	HIALEAH FL 33015

Title	AMBR
Name	SOSA, SEGUNDO
Address	19500 E SAINT ANDREWS DR
City-State-Zip:	HIALEAH FL 33015

Title	AMBR
Name	SOSA, JENNIFER
Address	19500 E SAINT ANDREWS DR
City-State-Zip:	HIALEAH FL 33015

Title	MGR
Name	HENRIQUEZ , CHRISTY
Address	19500 E SAINT ANDREWS DR
City-State-Zip:	HIALEAH FL 33015

Title	AUTHORIZED MEMBER
Name	SOSA, LILIANA
Address	19500 E SAINT ANDREWS DR
City-State-Zip:	HIALEAH FL 33015

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: SUMEY SOSA

AMBR

03/22/2023

Electronic Signature of Signing Authorized Person(s) Detail_____
Date