

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000181158

Entity Name: COMBET PARTNERS LLC**Current Principal Place of Business:**15811 COLLINS AVE
APT 2905
SUNNY ISL BCH, 33160**Current Mailing Address:**15811 COLLINS AVE
APT 2905
SUNNY ISL BCH, 33160 UN**FEI Number:** 36-4906037**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LE BLANC, GEORGES
15811 COLLINS AVE
APT 2905
SUNNY ISLE, 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:** GEORGES LE BLANC

03/12/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :Title MGR
Name LE BLANC, GEORGES
Address 15811 COLLINS AVE APT 2905
City-State-Zip: SUNNY ISLES FL 33160Title MGR
Name LE BLANC, ALBERTO
Address 15811 COLLINS AVE APT 2905
City-State-Zip: SUNNY ISLES FL 33160Title MGR
Name LE BLANC, CATALINA
Address 15811 COLLINS AVE APT 2905
City-State-Zip: SUNNY ISLES FL 33160Title MGR
Name MATTHAEI, CRISTEL
Address 15811 COLLINS AVE APT 2905
City-State-Zip: SUNNY ISLES FL 33160Title MANAGER
Name MATTHAEI, LE BLANC CRISTEL
Address 15811 COLLINS AVE
APT 2905
City-State-Zip: SUNNY ISL BCH 33169Title MGR
Name LE BLANC, MAGDALENA
Address 15811 COLLINS AVE APT 2905
City-State-Zip: SUNNY ISLES 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: LE BLANC, GEORGES

MANAGER

03/12/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date