

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000017008

Entity Name: COMERCIALIZADORA CIERO, LLC

Current Principal Place of Business:

1500 NW 89TH CT - STE. 106
DORAL, FL 33172

Current Mailing Address:

P.O. BOX 226708
MIAMI, FL 33222 US

FEI Number: 83-3207235

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGAL TAX AND BUSINESS SOLUTIONS
1500 NW 89TH CT - STE. 106
DORAL, FL 33172 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 MGR
Name FONTENLA BARBEITO, NESTOR M
Address 8430 SW 40TH STRET
City-State-Zip: MIAMI FL 33155

Title MGRM
Name FRANCO GAMEZ, CARLOS J
Address P.O. BOX 226708
City-State-Zip: MIAMI FL 33222

Title MGRM
Name FONTENLA, JOSE M
Address P.O. BOX 226708
City-State-Zip: MIAMI FL 33222

Title MGRM
Name D AMICO, GABRIEL
Address P.O. BOX 226708
City-State-Zip: MIAMI FL 33222

Title MGRM
Name IGLESIAS, NISAEAL
Address P.O. BOX 226708
City-State-Zip: MIAMI FL 33222

Title MGRM
Name DOS SANTOS, WILLIAM
Address P.O. BOX 226708
City-State-Zip: MIAMI FL 33222

Title MGRM
Name GONZALEZ, IRAIMA
Address P.O. BOX 226708
City-State-Zip: MIAMI FL 33222

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: GABRIEL D AMICO

MGRM

03/11/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date