2021 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 & 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: LUIS E. DAVILA 04/22/2021

Electronic Signature of Registered Agent

Date

FILED Apr 22, 2021

Secretary of State

3299688790CC

Authorized Person(s) Detail:

Title MGR Title MGRM

Name FONTENLA BARBEITO, NESTOR M Name FRANCO GAMEZ, CARLOS J

Address 8430 SW 40TH STRET Address P.O. BOX 226708

City-State-Zip: MIAMI FL 33155 City-State-Zip: MIAMI FL 33222

Title MGRM Title MGRM

 Name
 FONTENLA, JOSE M
 Name
 D AMICO, GABRIEL

 Address
 P.O. BOX 226708
 Address
 P.O. BOX 226708

 City-State-Zip:
 MIAMI FL 33222
 City-State-Zip:
 MIAMI FL 33222

Title MGRM Title MGRM

Name IGLESIAS, NISAEL Name DOS SANTOS, WILLIAM

 Address
 P.O. BOX 226708
 Address
 P.O. BOX 226708

 City-State-Zip:
 MIAMI FL 33222
 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: FONTENLA BARBEITO , NESTOR M MGRM 04/22/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date