

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000087727

**Entity Name:** EXPECT SOMETHING DIFFERENT LLC

**Current Principal Place of Business:**

1400 NW 96TH AVE  
DORAL, FL 33172

**Current Mailing Address:**

1400 NW 96TH AVE  
DORAL, FL 33172 US

**FEI Number: 85-1666759**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

SCHLESKE, HECTOR G  
1400 NW 96TH AVE  
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	Title	MGR
Name	SCHLESKE, HECTOR G	Name	ESCOBAR, JAIME E
Address	1400 NW 96TH AVE	Address	1400 NW 96TH AVE
City-State-Zip:	DORAL FL 33172	City-State-Zip:	DORAL FL 33172
Title	MGR		
Name	CASTELLANOS, NICOLAS		
Address	1400 NW 96TH AVE		
City-State-Zip:	DORAL FL 33172		

*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: HECTOR SCHLESKE**

**MANAGER**

**04/27/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date