

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000033750

**Entity Name:** SPENDLAB AMERICA'S LLC

**Current Principal Place of Business:**

1621 S BAYSHORE DRIVE  
MIAMI, FL 33133

**Current Mailing Address:**

1621 S BAYSHORE DRIVE  
MIAMI, FL 33133

**FEI Number: 84-4821456**

**Certificate of Status Desired: Yes**

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

SUAREZ, PABLO  
1623 S BAYSHORE DRIVE  
MIAMI, FL 33133 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 AR  
Name SUAREZ, PABLO  
Address 1623 S BAYSHORE DR  
City-State-Zip: MIAMI FL 33133

Title AR  
Name LOPEZ, MARINA  
Address 1623 S BAYSHORE DR  
City-State-Zip: MIAMI FL 33133

Title AR  
Name VIDAL, AFIFE  
Address 1621 S BAYSHORE DRIVE  
City-State-Zip: MIAMI FL 33133

Title AR  
Name MILAN, MILJAN  
Address 1621 S BAYSHORE DRIVE  
City-State-Zip: MIAMI FL 33133

Title COO  
Name GABRIEL, MALMIERCA  
Address 155 OCEAN LANE DR. APT 200  
City-State-Zip: KEY BISCAYNE FL 33149

*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 MALMIERCA**

**COO**

**04/08/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date