

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000040565

**Entity Name:** THREEFOLD OLAS AZULES, LLC

**Current Principal Place of Business:**

2601 S BAYSHORE DR., 18 FL  
COCONUT GROVE, FL 33133

**Current Mailing Address:**

2601 S BAYSHORE DR., 18 FL  
COCONUT GROVE, FL 33133 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

MELLAW REGISTERED AGENTS, LLC  
2601 S BAYSHORE DR., 18 FL  
COCONUT GROVE, 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 MGR  
Name SAGARO, MICHAEL  
Address 2601 S BAYSHORE DR., 18 FL  
City-State-Zip: COCONUT GROVE FL 33133

Title MGR  
Name ELJAIK, III, SANTIAGO  
Address 2601 S BAYSHORE DR., 18 FL  
City-State-Zip: COCONUT GROVE FL 33133

Title MGR  
Name ROBERT, LUIS  
Address 2601 S BAYSHORE DR., 18 FL  
City-State-Zip: COCONUT GROVE FL 33133

*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:** MICHAEL SAGARO

MGR

02/18/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date