### 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000134335

Entity Name: SAFINO,LLC

## **Current Principal Place of Business:**

1688 WEST AVE APT 301

MIAMI BEACH, FL 33139

# **Current Mailing Address:**

1688 WEST AVE **APT 301** 

MIAMI BEACH, FL 33139 US

FEI Number: 86-3214917 Certificate of Status Desired: No

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

SALVADO, HECTOR M SR 1688 WEST AVE APT 301 MIAMI BEACH, FL 33139 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

**FILED** Feb 25, 2025

**Secretary of State** 

3459366016CC

### Authorized Person(s) Detail:

Title

Address

SALVADO, HECTOR M Name

> 1688 WEST AVE APT301

SIGNATURE: HECTOR M SALVADO

City-State-Zip: MIAMI BEACH FL 33139

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.

**MGR** 

Electronic Signature of Signing Authorized Person(s) Detail

02/25/2025

Date