## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000243676

Entity Name: CABE LLC

FILED Feb 12, 2024 Secretary of State 3777138697CC

**Current Principal Place of Business:** 

632 NORTHEAST 20TH STREET WILTON MANORS. FL 33305

## **Current Mailing Address:**

632 NORTHEAST 20TH STREET WILTON MANORS, FL 33305

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMID, JACQUELINE 4610 SW 178TH AVENUE SOUTHWEST RANCHES, FL 33331 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

Name EPSTEIN, ALEC Name EPSTEIN, CASSIE B

Address 632 NORTHEAST 20TH STREET Address 632 NORTHEAST 20TH STREET

City-State-Zip: WILTON MANORS FL 33305 City-State-Zip: WILTON MANORS FL 33305

Title MGR Title MGR

Name ALCALAY, ELI Name ALCALAY, BENJI

Address 7800 CONGRESS AVENUE, #206 Address 7800 CONGRESS AVENUE, #206

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

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.

Electronic Signature of Signing Authorized Person(s) Detail

MGR