

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000293171

**Entity Name:** D & E DISTRIBUTION LLC

**Current Principal Place of Business:**

904 EDISON AVE  
LEGHIGH ACRES, FL 33972

**Current Mailing Address:**

904 EDISON AVE  
LEGHIGH ACRES, FL 33972 US

**FEI Number:** 93-2077018

**Certificate of Status Desired:** No

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

GONZALEZ, DAYMI  
5845 W 3RD LANE  
HIALEAH, FL 33012 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           | AMBR             |
| Name            | GONZALEZ, DAYMI  | Name            | SANCHEZ, EDEL    |
| Address         | 5845 W 3RD LANE  | Address         | 5845 W 3RD LANE  |
| City-State-Zip: | HIALEAH FL 33012 | City-State-Zip: | HIALEAH FL 33012 |

*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:** DAYMI GONZALEZ

**MGR**

**02/02/2024**

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

\_\_\_\_\_  
Date