

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000352835

**Entity Name:** SEND IT DISTRIBUTOR CO LLC

**Current Principal Place of Business:**

1200 BRICKELL AVENUE  
SUITE 1950 #1329  
MIAMI, FL 33133

**Current Mailing Address:**

1200 BRICKELL AVENUE  
SUITE 1950 #1329  
MIAMI, FL 33133 US

**FEI Number:** 93-2512764

**Certificate of Status Desired:** No

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

WITZEL, BENJAMIN  
1200 BRICKELL AVENUE  
SUITE 1950 #1329  
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            AMBR  
Name            WITZEL, BENJAMIN  
Address        1200 BRICKELL AVE  
                  SUITE 1950 # 1329  
City-State-Zip: MIAMI 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:** BENJAMIN WITZEL

**OWNER**

**03/04/2024**

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

\_\_\_\_\_  
Date