

**2026 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L24000172078

**Entity Name:** SADA SERVICES LLC

**Current Principal Place of Business:**

15765 SW 146 AVE  
MIAMI, FL 33177

**Current Mailing Address:**

15765 SW 146 AVE  
MIAMI, FL 33177 UN

**FEI Number:** 99-2555983

**Certificate of Status Desired:** Yes

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

DURAN, ALVARO J  
15765 SW 146 AVE  
MIAMI, FL 33177 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 AR  
Name DURAN, ALVARO J  
Address 15765 SW 146TH AVE  
City-State-Zip: MIAMI FL 33177

Title MGR  
Name ARTOLA, HAZEL A  
Address 15765 SW 146TH AVE  
City-State-Zip: MIAMI FL 33177

Title AMBR  
Name MATUTE, ARAN F  
Address 15765 SW 146TH AVE  
City-State-Zip: MIAMI FL 33177

Title CEO  
Name DURAN, STEFFANY A  
Address 15765 SW 146 AVE  
City-State-Zip: MIAMI FL 33177

Title AMBR  
Name DURAN, NOEL E  
Address 15765 SW 146 AVE  
City-State-Zip: MIAMI FL 33177

*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:** ALVARO J DURAN

AR

04/07/2026

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

\_\_\_\_\_  
Date