	MI, FL 33181			
FEI Number: 35-2706720			Certificate of Status Desired: No	
Name and A	Address of Current Registered Agent:			
	SERVICES L.L.C. NE BLVD OFFICE CU-T3 FL 33181 US			
The above named	d entity submits this statement for the purpose of changing i	its registered office or regis	tered agent, or both, in the State of Florida.	
The above named	, , , , , , , , , , , , , , , , , , , ,	its registered office or regis	tered agent, or both, in the State of Florida.	
	, , , , , , , , , , , , , , , , , , , ,	ts registered office or regis	• · · ·	Date
SIGNATURE	E:	its registered office or regis	• · · ·	Date
SIGNATURE	Electronic Signature of Registered Agent	ts registered office or regist	• · · ·	Date
SIGNATURE	Electronic Signature of Registered Agent Person(s) Detail :		E	)ate
SIGNATURE Authorized Title	Electronic Signature of Registered Agent Person(s) Detail : AMBR	Title	AMBR	

## DOCUMENT# L21000085768

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: JABBIONETA LLC

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

13499 BISCAYNE BLVD OFFICE CU-T3 NORTH MIAMI, FL 33181

AMBR

City-State-Zip: NORTH MIAMI FL 33181

RAPACHOLI, MARCELA A

13499 BISCAYNE BLVD OFFICE CU-T3

## **Current Mailing Address:**

Title

Name

Address

13499 BISCAYNE BI VD OFFICE CU-T3

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: RAPACHOLI, JORGE E

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 17, 2022 **Secretary of State** 4466226342CC

City-State-Zip: NORTH MIAMI FL 33181

AMBR

03/17/2022

Date