

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000065947

Entity Name: SENRA REALTY, LLC**Current Principal Place of Business:**1757 SOUTH WOOD DRIVE
ASHBORO, NC 27205**Current Mailing Address:**145 PHENIX AVENUE
2ND FLOOR
CRANSTON, RI 02920**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CAPOTE, BEATRIZ MESQ.
1200 BRICKELL AVE STE 507
MIAMI, FL 33131 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 |
| Name | SENRA, OCTAVIO |
| Address | 1757 SOUTH WOOD DRIVE |
| City-State-Zip: | ASHBORO NC 27205 |
| Title | MGRM |
| Name | CREMILDA SENRA, TRUSTEE OF THE CREMILDA SE |
| Address | 1757 SOUTH WOOD DRIVE |
| City-State-Zip: | ASHBORO NC 27205 |

| | |
|-----------------|---|
| Title | MGRM |
| Name | OCTAVIO SENRA, TRUSTEE OF THE OCTAVIO SENR |
| Address | 1757 SOUTH WOOD DRIVE |
| City-State-Zip: | ASHBORO NC 27205 |

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: OCTAVIO SENRA**MEMBER****02/05/2023**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date