## **2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000089608

Entity Name: ALVIAR ROLL-OFFS, LLC

**Current Principal Place of Business:** 

1029 N 29TH ST IMMOKALEE. FL 34142 FILED
Jun 13, 2019
Secretary of State
0133189611CC

## **Current Mailing Address:**

**PO BOX 328** 

IMMOKALEE. FL 34143 US

FEI Number: 20-3451388 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ALVIAR, DELIA B 1029 N 29TH ST IMMOKALEE, FL 34142 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 MANAGING MEMBER Title

Name ALVIAR, RUBEN Name ALVIAR, DELIA B
Address PO BOX 328 Address PO BOX 328

City-State-Zip: IMMOKALEE FL 34143 City-State-Zip: IMMOKALEE FL 34143

Title MGR

Name ALVIAR, JORDAN Address 1029 N 29TH ST

City-State-Zip: IMMOKALEE FL 34142

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: DELIA B ALVIAR

MANAGER MEMBER

**MGRM** 

06/13/2019