

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000050501

**Entity Name:** VIRTUAL OUT, LLC

**Current Principal Place of Business:**

419 W 49TH STREET  
216  
HIALEAH, FL 33012

**Current Mailing Address:**

419 W 49TH STREET  
216  
HIALEAH, FL 33012

**FEI Number:** 27-2575747

**Certificate of Status Desired:** No

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

LOPEZ, RAFAEL  
419 W 49 ST  
216  
HIALEAH, FL 33012 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:** RAFAEL LOPEZ

02/03/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name LOPEZ, RAFAEL  
Address 5035 PALM AVENUE  
City-State-Zip: HIALEAH FL 33012

Title MGR  
Name YANES, LUIS  
Address 5035 PALM AVENUE  
City-State-Zip: HIALEAH FL 33012

Title MANAGER  
Name FIGUEROA, SARAH T  
Address 220 W 74 PL  
518  
City-State-Zip: HIALEAH FL 33014

*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:** LOPEZ , RAFAEL

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02/03/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date