# 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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: JULIAN J RODRIGUEZ

MBR

04/03/2024

#### Entity Name: ADVAL CONSULTING, LLC

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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

2600 SOUTH DOUGLAS ROAD 900 CORAL GABLES, FL 33134

DOCUMENT# L10000051710

### **Current Mailing Address:**

2600 SOUTH DOUGLAS ROAD 900 CORAL GABLES, FL 33134 US

### FEI Number: 27-2612690

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

ATRIUM REGISTERED AGENTS, INC. 8950 SOUTHWEST 74TH COURT SUITE 1901 MIAMI, FL 33156 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

#### Authorized Person(s) Detail :

Authorized Person(s) Detail :			
Title	MGR	Title	MANAGING MEMBER
Name	RODRIGUEZ, JULIAN J	Name	NEGRIN, ALBERTO O
Address	2600 SOUTH DOUGLAS ROAD 900	Address	2600 SOUTH DOUGLAS ROAD 900
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134

## FILED Apr 03, 2024 Secretary of State 0793957171CC

Certificate of Status Desired: No

Date

Date