

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000000553

**Entity Name:** WWW.ALLEGROGROUPFL.COM, LLC

**Current Principal Place of Business:**

2073 ISLA DE PALMA CIRCLE  
NAPLES, FL 34119

**Current Mailing Address:**

15275 COLLIER BLVD. #201-282  
NAPLES, FL 34119

**FEI Number:** 45-4759077

**Certificate of Status Desired:** No

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

DIAZ, HECTOR  
15275 COLLIER BLVD. #201-282  
NAPLES, FL 34119 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	Title	MGRM
Name	DIAZ, HECTOR	Name	KRING, TAD
Address	1802 KRAPE RD	Address	2073 ISLA DE PALMA CIRCLE
City-State-Zip:	NAPLES FL 34120	City-State-Zip:	NAPLES FL 34119

*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:** HECTOR DIAZ

**MGR**

**04/30/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date