## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000169375

Entity Name: ALPAKA, LLC

**Current Principal Place of Business:** 

% THERREL BAISDEN, P.A. ONE SE 3RD AVE - STE 2950

MIAMI, FL 33131

## **Current Mailing Address:**

% THERREL BAISDEN, P.A. ONE SE 3RD AVE - STE 2950 MIAMI, FL 33131

FEI Number: 46-4275664 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

THERREL BAISDEN, P.A. SUNTRUST INTERNATIONAL CENTER ONE SE 3RD AVE - STE 2950 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

**FILED** Jan 31, 2024

**Secretary of State** 

6532468852CC

Authorized Person(s) Detail:

Title Title MGR MGR

Name GARZON, ISAAC Name GARZON, LYNN

2711 SOUTH OCEAN DRIVE 2711 SOUTH OCEAN DRIVE Address Address

**APT 1203 APT 1203** 

City-State-Zip: HOLLYWOOD FL 33019 City-State-Zip: HOLLYWOOD FL 33019

Title **MANAGER** Title **MANAGER** 

Name GARZON, ALAN PHILIP Name GARZON, PAUL BERNARD

Address % THERREL BAISDEN, P.A. Address % THERREL BAISDEN, P.A. ONE SE 3RD AVE - STE 2950

ONE SE 3RD AVE - STE 2950

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Title **MANAGER** 

GARZON, KAREN ILANA Name Address % THERREL BAISDEN, P.A.

ONE SE 3RD AVE - STE 2950

City-State-Zip: MIAMI FL 33131

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.

01/31/2024 SIGNATURE: ISAAC GARZON **MANAGER**