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: RENE PONCE

Electronic Signature of Signing Authorized Person(s) Detail

Current Principal Place of Business: 175 SW 7 STREET

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

2307 MIAMI, FL 33130

Current Mailing Address:

DOCUMENT# L14000127186

175 SW 7 STREET 2307 MIAMI, FL 33130 US

FEI Number: 47-1668861

Name and Address of Current Registered Agent:

PONCE, DANIEL 175 SW 7 STREET 2307 MIAMI, FL 33130 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	CONTEL PONCE			04/24/2023
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	CEO	Title	MANAGER	
Name	PONCE, FABIAN	Name	PONCE, RENE	
Address	175 SW 7 STREET 2307	Address	175 SW 7 STREET 2307	
City-State-Zip:	MIAMI FL 33130	City-State-Zip:	MIAMI FL 33130	
Title	MANAGER			
Name	PONCE, DANIEL			
Address	175 SW 7 STREET 2307			

City-State-Zip: MIAMI FL 33130

Certificate of Status Desired: No

Date

04/24/2023

FILED Apr 24, 2023 Secretary of State 8977195080CC