

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000188327

**Entity Name:** JW ALVARENGA LLC

**Current Principal Place of Business:**

506 JENNIFER LN  
WINDERMERE, FL 34786

**Current Mailing Address:**

506 JENNIFER LN  
WINDERMERE, FL 34786 US

**FEI Number:** 47-2503889

**Certificate of Status Desired:** No

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

ALBUQUERQUE, WALMIRIA  
506 JENNIFER LN  
WINDERMERE, FL 34786 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 AMBR  
Name ALBUQUERQUE, WALMIRIA  
Address 506 JENNIFER LN  
City-State-Zip: WINDERMERE FL 34786

Title AMBR  
Name ALVARENGA DA SILVA, JONAS  
Address 506 JENNIFER LN  
City-State-Zip: WINDERMERE FL 34786

Title MBR  
Name CAROLINA BURLAMAQUI, MORGANA  
Address 506 JENNIFER LN  
City-State-Zip: WINDERMERE FL 34786

*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:** WALMIRIA ALBUQUERQUE

RA

04/29/2017

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

\_\_\_\_\_ Date