

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000051357

**Entity Name:** ETTL INVESTMENTS LLC**Current Principal Place of Business:**4318 NW 5TH AVE  
DEERFIELD BEACH, FL 33063**Current Mailing Address:**5052 NW 45TH AVE  
COCONUT CREEK, FL 33073 US**FEI Number:** 47-3509987**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TAX SECRETS INC  
5052 NW 45TH AVE  
COCONUT CREEK, FL 33073 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	SILVA, ELIAS M
Address	5052 NW 45TH AVE
City-State-Zip:	COCONUT CREEK FL 33073

Title	MANAGER
Name	SILVA, THIAGO P
Address	5052 NW 45TH AVE
City-State-Zip:	COCONUT CREEK FL 33073

Title	AMBR
Name	SILVA, TAIS P
Address	5052 NW 45TH AVE
City-State-Zip:	COCONUT CREEK FL 33073

Title	MANAGER
Name	SILVA, LUCAS
Address	5052 NW 45TH AVE
City-State-Zip:	COCONUT CREEK FL 33073

*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:** ELIAS SILVA

AMBR

02/23/2021

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