2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000134598

Entity Name: GRUPO MEGACONSULTING, LLC

Current Principal Place of Business:

3625 NW 82 AVE SUITE 100-K DORAL, FL 33166

Current Mailing Address:

3625 NW 82 AVE SUITE 100-K DORAL, FL 33166 US

FEI Number: 47-5149771

Name and Address of Current Registered Agent:

GLOBALIA RENT MANAGAMENT LLC 19400 TURNBERRY WAY SUITE 2 AVENTURA, FL 33180 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.

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GLOBALIA RENT MANAGEMENT		03/31/2023
Electronic Signature of Registered Agent		Date
Person(s) Detail :		
MGR	Title	MGR
MELEAN COLLAZO, RAFAEL A	Name	GALAVIS POTENTINI, WESTALIA J
3625 NW 82 AVENUE, SUITE 100-K	Address	3625 NW 82 AVENUE, SUITE 100-L
DORAL FL 33166	City-State-Zip:	DORAL FL 33166
MGR	Title	MGR
MOR		
MELEAN GALAVIS, KAREM J	Name	MELEAN GALAVIS, ARIANA A
3625 NW 82 AVENUE, SUITE 100-K	Address	3625 NW 82 AVENUE, SUITE 100-K
DORAL FL 33166	City-State-Zip:	DORAL FL 33166
	Electronic Signature of Registered Agent erson(s) Detail : MGR MELEAN COLLAZO, RAFAEL A 3625 NW 82 AVENUE, SUITE 100-K DORAL FL 33166 MGR MELEAN GALAVIS, KAREM J 3625 NW 82 AVENUE, SUITE 100-K	Electronic Signature of Registered Agent erson(s) Detail : MGR Title MELEAN COLLAZO, RAFAEL A Name 3625 NW 82 AVENUE, SUITE 100-K Address DORAL FL 33166 City-State-Zip: MGR Title MELEAN GALAVIS, KAREM J Name 3625 NW 82 AVENUE, SUITE 100-K Address

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: KAREM J MELEAN GALAVIS

MANAGER

03/31/2023 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 31, 2023 Secretary of State 03495955554CC

Certificate of Status Desired: No