

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000023925

**Entity Name:** GRANADA 22, LLC

**Current Principal Place of Business:**

7735 NW 146 STREET  
SUITE 300  
MIAMI, FL 33016

**Current Mailing Address:**

2700 GLADES CIRCLE  
SUITE 159  
WESTON, FL 33327 US

**FEI Number:** 82-1023258

**Certificate of Status Desired:** Yes

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

MANUEL DINER, P.A.  
7735 NW 146 STREET  
SUITE 300  
MIAMI LAKES, FL 33016 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           | MGRM                         | Title           | MGRM                         |
| Name            | COVA, VICTOR H               | Name            | CASTILLO DE COVA, FANNY M    |
| Address         | 2700 GLADES CIRCLE SUITE 159 | Address         | 2700 GLADES CIRCLE SUITE 159 |
| City-State-Zip: | WESTON FL 33327              | City-State-Zip: | WESTON FL 33327              |

*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:** VICTOR COVA

**MANAGER**

**03/02/2023**

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

\_\_\_\_\_  
Date