

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000138356

**Entity Name:** EFFI LLC

**Current Principal Place of Business:**

405 SUNPORT LN  
STE 450  
ORLANDO, FL 32809

**Current Mailing Address:**

405 SUNPORT LN  
STE 450  
ORLANDO, FL 32809 US

**FEI Number:** 81-3405641

**Certificate of Status Desired:** No

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

ARBOLEA-BORRAS, CAROLINE  
405 SUNPORT LN  
STE 450  
ORLANDO, FL 32809 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 MGR  
Name ARBOLEA-BORRAS, CAROLINE  
Address 405 SUNPORT LN  
STE 450  
City-State-Zip: ORLANDO FL 32809

Title MANAGER  
Name ROQUE, FELIPE  
Address 405 SUNPORT LN  
STE 450  
City-State-Zip: ORLANDO FL 32809

*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:** ARBOLEA-BORRAS , CAROLINE

**OWNER**

**04/29/2022**

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

\_\_\_\_\_  
Date