

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000013070

Entity Name: OTALORA VIZCAYNE, LLC**Current Principal Place of Business:**18535 SW 42ND ST.
MIRAMAR, FL 33029**Current Mailing Address:**18535 SW 42ND ST.
MIRAMAR, FL 33029**FEI Number: 81-5373776****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**OTALORA, RAFAEL
18535 SW 42ND ST.
MIRAMAR, FL 33029 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	OTALORA, RAFAEL
Address	18535 SW 42ND ST.
City-State-Zip:	MIRAMAR FL 33029

Title	MGR
Name	REVOLLO, MARIA T
Address	18535 SW 42ND ST.
City-State-Zip:	MIRAMAR FL 33029

Title	MGR
Name	OTALORA, JORGE E
Address	18535 SW 42ND ST.
City-State-Zip:	MIRAMAR FL 33029

Title	MGR
Name	OTALORA, MARIA E
Address	2886 SW 127TH AVE.
City-State-Zip:	MIRAMAR FL 33027

Title	MGR
Name	OTALORA, JUAN M
Address	18535 SW 42ND ST.
City-State-Zip:	MIRAMAR FL 33029

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: RAFAEL OTALORA**MANAGER****04/21/2021**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date