

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000100097

**Entity Name:** CONDORES HOUSING, LLC

**Current Principal Place of Business:**

14 NE 1ST AVE  
SUITE 305  
MIAMI, FL 33132

**Current Mailing Address:**

14 NE 1ST AVE  
SUITE 305  
MIAMI, FL 33132 US

**FEI Number:** 61-1845859

**Certificate of Status Desired:** No

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

INTERAMERICAN CORPORATE SERVICE LLC  
2525 PONCE DELEON BLVD., STE. 1225  
CORAL GABLES, FL 33134 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                        | Title           | AUTHORIZED REPRESENTATIVE   |
| Name            | MATSUMOTO, NAOSHI          | Name            | IZQUIERDO CHADWICK, NICOLAS |
| Address         | 14 NE 1ST AVE<br>SUITE 305 | Address         | 14 NE 1ST AVE<br>SUITE 305  |
| City-State-Zip: | MIAMI FL 33132             | City-State-Zip: | MIAMI FL 33132              |

*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:** IZQUIERDO CHADWICK, NICOLAS

AP

02/07/2022

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

\_\_\_\_\_  
Date