## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000126299

Entity Name: AMATRIX W3 NETWORK LLC

**Current Principal Place of Business:** 

C/O GENER ACTION, INC. 14681 BISCAYNE BLVD., SUITE 327 NORTH MIAMI, FL 33181

## **Current Mailing Address:**

C/O GENER ACTION, INC. 14681 BISCAYNE BLVD., STE.327 NORTH MIAMI, FL 33181 US

FEI Number: 82-1875510 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SYLVESTRE, PATRICIA C/O GENER ACTION, INC. 14681 BISCAYNE BLVD., SUITE 327 NORTH MIAMI, FL 33181 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: PATRICIA SYLVESTRE 04/29/2024

Electronic Signature of Registered Agent Date

## Authorized Person(s) Detail:

Title MGR

Name SYLVESTRE, PATRICIA
Address C/O GENER ACTION, INC.

14681 BISCAYNE BLVD., SUITE 327

City-State-Zip: NORTH MIAMI FL 33181

SIGNATURE: PATRICIA SYLVESTRE

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.

Electronic Signature of Signing Authorized Person(s) Detail

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**MANAGER** 

FILED Apr 29, 2024

**Secretary of State** 

0069602603CC

Date

04/29/2024