

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000009096

**Entity Name:** HACHEDEPE LLC

**Current Principal Place of Business:**

16214 VIA SOLERA CIR  
101  
FORT MYERS, FL 33908

**Current Mailing Address:**

16214 VIA SOLERA CIR  
101  
FORT MYERS, FL 33908 US

**FEI Number:** 83-3171639

**Certificate of Status Desired:** No

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

FLESLER, LUCIANA  
16214 VIA SOLERA CIR  
101  
FORT MYERS, FL 33908 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            AMBR  
Name            FRESLER, LUCIANA R  
Address        16214 VIA SOLERA CIR # 101  
City-State-Zip: FORT MYERS FL 33908

Title            AMBR  
Name            LAAR, NANDOR M  
Address        16214 VIA SOLERA CIR # 101  
City-State-Zip: FORT MYERS FL 33908

Title            AMBR  
Name            PIATTI, IGNACIO G  
Address        16214 VIA SOLERA CIR # 101  
City-State-Zip: FORT MYERS FL 33908

*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:** IGNACIO PIATTI

01/15/2020

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

\_\_\_\_\_  
Date