

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000103215

**Entity Name:** ALHOAN LLC

**Current Principal Place of Business:**

11098 BISCAYNE BLVD  
SUITE 401-5  
MIAMI, FL 33161

**Current Mailing Address:**

11098 BISCAYNE BLVD  
SUITE 401-5  
MIAMI, FL 33161 US

**FEI Number:** 37-1942254

**Certificate of Status Desired:** No

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

VARGAS, FEDERICO  
11098 BISCAYNE BLVD  
SUITE 401-5  
MIAMI, FL 33161 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 SPARROW, ANDREA M  
Address 11098 BISCAYNE BLVD, SUITE 401-5  
City-State-Zip: MIAMI FL 33161

Title MGR  
Name MEDONE, JOSE L  
Address 11098 BISCAYNE BLVD SUITE 401-5  
City-State-Zip: MIAMI FL 33161

Title MGR  
Name MEDONE SPARROW, ALAN  
Address 11098 BISCAYNE BLVD SUITE 401-5  
City-State-Zip: MIAMI FL 33161

Title AR  
Name VARGAS, FEDERICO  
Address 11098 BISCAYNE BLVD, SUITE 401-5  
City-State-Zip: MIAMI FL 33161

*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:** ALAN MEDONE SPARROW

MGR

03/09/2020

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

\_\_\_\_\_  
Date