

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000148772

**Entity Name:** MACABO9, LLC

**Current Principal Place of Business:**

6395 CORPORATE CENTRE BLVD  
307  
ORLANDO, FL 32822

**Current Mailing Address:**

6395 CORPORATE CENTRE BLVD  
307  
ORLANDO, FL 32822 US

**FEI Number:** 84-2098731

**Certificate of Status Desired:** No

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

TAX CARE INC  
1400 NW 107TH AVE, STE 430  
MIAMI, FL 33172 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	MGR
Name	CAROLINA BOHORQUEZ, MARIA	Name	ROJAS, GUSTAVO A
Address	6395 CORPORATE CENTRE BLVD 307	Address	6395 CORPORATE CENTRE BLVD 307
City-State-Zip:	ORLANDO FL 32822	City-State-Zip:	ORLANDO FL 32822

*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:** MARIA CAROLINA BOHORQUEZ

MGR

06/29/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date