

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000197661

**Entity Name:** NEXO ARQUITECTOS LLC

**Current Principal Place of Business:**

15800 PINES BLVD  
SUITE 317  
PEMBROKE PINES, FL 33027

**Current Mailing Address:**

C/O REYGADAS & ASSOC  
15800 PINES BLVD SUITE 3917  
PEMBROKE PINES, FL 33027

**FEI Number:** 84-4470553

**Certificate of Status Desired:** No

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

REYGADAS & ASSOCIATES INC  
15800 PINES BLVD  
SUITE 317  
PEMBROKE PINES, FL 33027 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 KRINIS, JORGE  
Address CALLE DEL BOSQUE 10  
COL SATELITE  
City-State-Zip: CUERNAVACA MORELOS 62350

Title MGR  
Name RODRIGUEZ, IVETT RUBI  
Address CALLE DEL BOSQUE 10  
COL SATELITE  
City-State-Zip: CUERNAVACA MORELOS 62350

Title MGR  
Name REYGADAS, JOSE A  
Address 15800 PINES BLVD SUITE 317  
City-State-Zip: PEMBROKE PINES FL 33027

*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:** JOSE A REYGADAS

MGR

03/30/2022

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

\_\_\_\_\_  
Date