

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000036761

**Entity Name:** SAVERNE LLC

**Current Principal Place of Business:**

15390 SW 20 ST  
MIAMI, FL 33185

**Current Mailing Address:**

15390 SW 20 ST  
MIAMI, FL 33185 US

**FEI Number:** 61-1965467

**Certificate of Status Desired:** Yes

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

COLINA, ENRIQUE L.  
15390 SW 20 ST  
MIAMI, FL 33185 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            ELIYONA SA DE CV  
Address        RIO CHURUBUSCO 320 ALCADIA  
                  COYOACAN  
City-State-Zip: MEXICO CITY, MEXICO 04100 AL

*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:** ELIYONA SA DE CV

AMBR

01/30/2023

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

\_\_\_\_\_ Date