

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000044362

**Entity Name:** LA FLORESTA INVESTMENTS, LLC**Current Principal Place of Business:**2749 SW BACKTON AVENUE  
PORT ST LUCIE, FL 34987**Current Mailing Address:**2749 SW BACKTON AVENUE  
PORT ST LUCIE, FL 34987 US**FEI Number:** 84-4725131**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VELA, ORLANDO  
2749 SW BACKTON AVENUE  
PORT ST LUCIE, FL 34987 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	VELA, ORLANDO
Address	2749 SW BACKTON AVENUE
City-State-Zip:	PORT ST LUCIE FL 34987

Title	AMBR
Name	GOMEZ, MARIA ADRIANA
Address	2749 SW BACKTON AVENUE
City-State-Zip:	PORT ST LUCIE FL 34987

Title	AMBR
Name	VELA, PABLO
Address	2749 SW BACKTON AVENUE
City-State-Zip:	PORT ST LUCIE FL 34987

Title	AMBR
Name	VELA, ALEJANDRO
Address	2749 SW BACKTON AVENUE
City-State-Zip:	PORT ST LUCIE FL 34987

*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:** ORLANDO VELA

AMBR

01/25/2022

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