

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000089059

**Entity Name:** 23 ALHAMBRA LLC

**Current Principal Place of Business:**

5137 SEAHORSE AVE  
NAPLES, FL 34103

**Current Mailing Address:**

5137 SEAHORSE AVE  
NAPLES, FL 34103 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

WWMR STATUTORY AGENT, LLC  
9045 STRADA STELL COURT  
4TH FLOOR  
NAPLES, FL 34109 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	CAINE, ANDREW	Name	CAINE, JOY
Address	5137 SEAHORSE AVE	Address	34 ALHAMBRA DRIVE
City-State-Zip:	NAPLES FL 34103	City-State-Zip:	OCEANSIDE NY 11572

*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:** ANDREW CAINE

MGR

04/07/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date