Electronic Signature of Signing Authorized Person(s) Detail

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 mad

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.

MANAGER

7750 SW 117TH AVE 205 MIAMI, FL 33183 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

Authorized Person(s) Detail :

Authorized Person(s) Detail .			
Title	MGR	Title	MGR
Name	PEREZ, SELFA	Name	CASTELLON, JACQUELINE
Address	7750 SW 117TH AVE, SUITE 205	Address	7750 SW 117TH AVE, SUITE 205
City-State-Zip:	MIAMI FL 33183	City-State-Zip:	MIAMI FL 33183
Title	AMBR	Title	AMBR
Title Name	AMBR PEREZ, SELFA	Title Name	AMBR CASTELLON, JACQUELINE
Name	PEREZ, SELFA	Name	CASTELLON, JACQUELINE

DOCUMENT# L20000256121

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: 10546 SW 118 AVE, LLC

Current Principal Place of Business:

7750 SW 117TH AVE 205 MIAMI, FL 33183

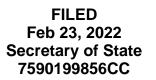
Current Mailing Address:

7750 SW 117TH AVE 205 MIAMI, FL 33183

FEI Number: 85-2763540

Name and Address of Current Registered Agent:

Name and Address of CASTELLON, JACQUELINE



Certificate of Status Desired: No

Date

02/23/2022

Date