

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000351741

**FILED**  
**Mar 14, 2022**  
**Secretary of State**  
**3723103285CC**

**Entity Name:** MIOTTI PARTNERS CAPITAL, LLC

**Current Principal Place of Business:**

1802 N ALAFAYA TRAIL  
STE 160  
ORLANDO, FL 32826

**Current Mailing Address:**

10922 CRESCENT RIDGE LOOP  
CLERMONT, FL 34711 US

**FEI Number:** 85-4018600

**Certificate of Status Desired:** No

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

CHUCK, SANDRA  
10922 CRESCENT RIDGE LOOP  
CLERMONT, FL 34711 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 LIVE LIFE DYNASTY, LLC  
Address 10922 CRESCENT RIDGE LOOP  
City-State-Zip: CLERMONT FL 34711

Title MGR  
Name DANIELKWAKHOLDINGS, LLC  
Address 3S721 WEST AVENUE, SUITE 100  
City-State-Zip: WARRENVILLE IL 60555

Title MGR  
Name WILLIAMES HOLDINGS, LLC  
Address 961 DENNY ROAD  
City-State-Zip: SUGAR GROVE IL 60554

Title MGR  
Name SAM KWAK CAPITAL, LLC  
Address 35721 WEST AVENUE  
STE 100  
City-State-Zip: WARRENVILLE IL 60555

Title MGR  
Name COLLECTIVE MANAGEMENT, LLC  
Address 4046 N. GOLDENROD ROAD, SUITE 232  
City-State-Zip: WINTER PARK FL 32792

Title MGR  
Name AAA PREMIER SOLUTIONS, LLC  
Address 4530 S. ORANGE BLOSSOM TRAIL, SUITE 544  
City-State-Zip: ORLANDO FL 32839

Title MGR  
Name THE EVEREST GROUP, INC  
Address 2022 QUAKER HOLLOW LN  
City-State-Zip: STREAMWOOD IL 60107

Title MGR  
Name REALVISION ENTERPRISES, LLC  
Address 1802 N ALAFAYA TRAIL  
STE 160  
City-State-Zip: ORLANDO FL 32826

*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:** SANDRA CHUCK

**MGR**

**03/14/2022**

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

\_\_\_\_\_  
Date