

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000047935

**Entity Name:** MIAMI ALLIANCE, LLC

**Current Principal Place of Business:**

2999 N.E. 191ST STREET  
STE 907  
AVENTURA, FL 33180

**Current Mailing Address:**

2999 N.E. 191ST STREET  
STE 907  
AVENTURA, FL 33180 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

SHAMAYEV LAW, P.A.  
2999 N.E. 191ST STREET  
STE 910  
STE 910, FL 33180 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 MBR  
Name SHAMAYEV LAW, P.A.  
Address 2999 N.E. 191ST STREET, STE 907  
City-State-Zip: AVENTURA FL 33180

Title MBR  
Name VERA REALITY, LLC  
Address 2999 N.E. 191ST STREET, STE 907  
City-State-Zip: AVENTURA FL 33180

Title MBR  
Name FINCOM GROUP USA, INC  
Address 2999 N.E. 191ST STREET, STE 907  
City-State-Zip: AVENTURA FL 33180

*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:** STANISLAV SHAMAYEV

**MANAGING MEMBER**

**03/10/2022**

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

\_\_\_\_\_  
Date