

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000084094

Entity Name: GAMANLI, LLC**Current Principal Place of Business:**2801 NE 183RD ST
APT. 116
AVENTURA, FL 33160**Current Mailing Address:**2801 NE 183RD ST
APT. 116
AVENTURA, FL 33160 US**FEI Number:** 88-0726121**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ATALA Y SEMAN, NICOLAS E
2801 NE 183RD ST
APT. 116
AVENTURA, FL 33160 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 ATALA Y SEMAN, NICOLAS E
Address 2801 NE 183RD ST
APT. 116
City-State-Zip: AVENTURA FL 33160

Title MGR
Name ATALA MANZUR, GABRIELA
Address 2801 NE 183RD ST
APT. 116
City-State-Zip: AVENTURA FL 33160

Title MGR
Name ATALA MANZUR, LILIAN
Address 2801 NE 183RD ST
APT. 116
City-State-Zip: AVENTURA FL 33160

Title AMBR
Name MANZUR DE ATALA, MARILYN
Address 2801 NE 183RD ST
APT. 116
City-State-Zip: AVENTURA FL 33160

Title MGR
Name ATALA MANZUR, MARILYN
Address 2801 NE 183RD ST
APT. 116
City-State-Zip: AVENTURA FL 33160

Title MGR
Name ATALA MANZUR, ANDREA
Address 2801 NE 183RD ST
APT. 116
City-State-Zip: AVENTURA FL 33160

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: ATALA Y SEMAN , NICOLAS E

MGR

03/30/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date