

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000104576

Entity Name: GF PUCON LLC**Current Principal Place of Business:**TALAVERA DE LA REINA 330
LAS CONDES, SANTIAGO, CH 75701-32**Current Mailing Address:**7742 N KENDALL DR
#467
MIAMI, FL 33156 UN**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VITERI FINANCIAL CORPORATION
6721 SW 69 TERRACE
SOUTH MIAMI, FL 33143 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 GIMENEZ PEREZ, CESAR A
Address 7742 N KENDALL DR #467
City-State-Zip: MIAMI FL 33156

Title AMBR
Name FERNANDEZ CARDEMIL, ESTELA M
Address 7742 N KENDALL DR #467
City-State-Zip: MIAMI FL 33156

Title AMBR
Name GIMENEZ FERNANDEZ, ROCIO J
Address 7742 N KENDALL DR #467
City-State-Zip: MIAMI FL 33156

Title AMBR
Name GIMENEZ FERNANDEZ, CESAR D
Address 7742 N KENDALL DR #467
City-State-Zip: MIAMI FL 33156

Title AMBR
Name GIMENEZ FERNANDEZ, RODRIGO A
Address 7742 N KENDALL DR #467
City-State-Zip: MIAMI FL 33156

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: CESAR A GIMENEZ PEREZ

AMBR

04/30/2022

Electronic Signature of Signing Authorized Person(s) Detail_____
Date