

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000480306

**Entity Name:** MASTER PRPP LLC

**Current Principal Place of Business:**

1989 NE 163 RD, ST  
NORTH MIAMI BEACH, FL 33162

**Current Mailing Address:**

1989 NE 163 RD, ST  
NORTH MIAMI BEACH, FL 33162 US

**FEI Number:** 87-3614447

**Certificate of Status Desired:** No

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

FONSECA, DIEGO  
5040 FRATTINA ST  
AVE MARIA, FL 34142 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	Title	MGR
Name	BENAVIDES, ANDRES	Name	HERRERA, CLARA INES
Address	1989 NE 163 RD, ST	Address	1989 NE 163 RD, ST
City-State-Zip:	NORTH MIAMI BEACH FL 33162	City-State-Zip:	NORTH MIAMI BEACH FL 33162

*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:** ANDRES BENAVIDES

**MGR**

**05/01/2023**

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

\_\_\_\_\_  
Date