

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000072046

**Entity Name:** DUVEL LLC

**Current Principal Place of Business:**

6386 NW 97 AVE  
DORAL, FL 33178

**Current Mailing Address:**

6386 NW 97 AVE  
DORAL, FL 33178

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MARTINS DUARTE, PATRICIA C  
1526 WHITEHALL DR APT 104  
DAVIE, FL 33324 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 MARTINS DUARTE, PATRICIA C  
Address 1526 WHITEHALL DR APT 104  
City-State-Zip: DAVIE FL 33324

Title AMBR  
Name MARTINS DUARTE, MARCIA REGINA  
Address 1526 WHITEHALL DR APT 104  
City-State-Zip: DAVIE FL 33324

Title AMBR  
Name MONTERIO VELOSO, CAIO  
Address 1526 WHITEHALL DR APT 104  
City-State-Zip: DAVIE FL 33324

*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:** PATRICIA CRISTINA MARTINS DUARTE

**MANAGER**

**04/30/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date