

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000074292

**Entity Name:** CHACARA DAS FLORES LLC

**Current Principal Place of Business:**

6030 MISSION HILL ST SE  
SALEM, OR 97306

**Current Mailing Address:**

6030 MISSION HILL ST SE  
SALEM, OR 97306 US

**FEI Number:** 35-2745769

**Certificate of Status Desired:** No

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

CONTADOR RA LLC  
4855 W HILLSBORO BLVD  
B3  
COCONUT CREEK, FL 33073 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	AMBR
Name	MACLEAN, EDUARDO A	Name	SALLES SCORTEGAGNA, NATHALIA
Address	6030 MISSION HILLS ST SE	Address	6030 MISSION HILLS ST SE
City-State-Zip:	SALEM OR 97306	City-State-Zip:	SALEM OR 97306

*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:** MACLEAN EDUARDO A

MGR

02/27/2023

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

\_\_\_\_\_ Date