

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000231539

**Entity Name:** MELBOURNE BEACH PROPERTY ASSOCIATES LLC

**Current Principal Place of Business:**

6225 NW 113 CT  
DORAL, FL 33178

**Current Mailing Address:**

6225 NW 113 CT  
DORAL, FL 33178

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

NIGAGLIONI, IRAIDA M  
6225 NW 113 CT.  
DORAL, FL 33178 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            | NIGAGLIONI, IRAIDA M    | Name            | DE LA LLANA, RENE M    |
| Address         | 6225 NW 113 CT          | Address         | 6225 NW 113 CT         |
| City-State-Zip: | DORAL FL 33178          | City-State-Zip: | DORAL FL 33178         |
|                 |                         |                 |                        |
| Title           | MGR                     | Title           | MGR                    |
| Name            | DE LA LLANA, GABRIELA J | Name            | DE LA LLANA, PATRICK N |
| Address         | 6225 NW 113 CT          | Address         | 6225 NW 113 CT         |
| City-State-Zip: | DORAL FL 33178          | City-State-Zip: | DORAL FL 33178         |

*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:** RENE M DE LA LLANA

**DIRECTOR**

**04/10/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date