

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000419860

**Entity Name:** ANDEAN CHOICE CO LLC

**Current Principal Place of Business:**

5990 NE 4TH CT  
APT 5  
MIAMI, FL 33137

**Current Mailing Address:**

5990 NE 4TH CT  
APT 5  
MIAMI, FL 33137 US

**FEI Number:** 92-0555313

**Certificate of Status Desired:** No

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

REGISTERED AGENTS INC  
7901 4TH ST N  
STE 300  
ST. PETERSBURG, FL 33702 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:** DAVID ROBERTS

04/30/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           ANDEAN CHOICE CO  
Address        5990 NE 4TH CT APT 5  
City-State-Zip: MIAMI FL 33137

*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:** JEFFREY MONTGOMERY

MANAGER

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date