

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000030591

**Entity Name:** GRANIER FRANCHISE COMPANY LLC

**Current Principal Place of Business:**

18230 COLLINS AVENUE  
SUNNY ISLES, FL 33160

**Current Mailing Address:**

18230 COLLINS AVENUE  
SUNNY ISLES, FL 33160

**FEI Number:** 92-1992629

**Certificate of Status Desired:** No

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

WXC CORPORATION  
8750 NW 36TH ST  
SUITE 540  
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:** OLGA ADRIANA MORENO

04/29/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name WORLD OVENTURES LLC  
Address 18230 COLLINS AVENUE  
City-State-Zip: SUNNY ISLES FL 33160

Title AMBR  
Name GRANIER PASTRY & BAKERY  
COFFEE LLC  
Address 18230 COLLINS AVENUE  
City-State-Zip: SUNNY ISLES FL 33160

Title AUTHORIZED REPRESENTATIVE  
Name POTES, ALVARO  
Address 18230 COLLINS AVENUE  
City-State-Zip: SUNNY ISLES FL 33160

Title AUTHORIZED REPRESENTATIVE  
Name MOLANO, ALEJANDRO  
Address 18230 COLLINS AVENUE  
City-State-Zip: SUNNY ISLES FL 33160

*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:** WORLD OVENTURES LLC

AMBR

04/29/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date