

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000268455

**Entity Name:** CARVALHO HOSPITALITY LLC

**Current Principal Place of Business:**

10929 CARNELIAN LN  
RIVERVIEW, FL 33578

**Current Mailing Address:**

10929 CARNELIAN LN  
RIVERVIEW, FL 33578 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

CCN HOSPITALITY LLC  
11520 CROWNED SPARROW LANE  
TAMPA, FL 33626 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	Title	MGR
Name	ROSE, COREY M	Name	CARVALHO, ROB
Address	11520 CROWNED SPARROW LANE	Address	10929 CARNELIAN LN
City-State-Zip:	TAMPA FL 33626	City-State-Zip:	RIVERVIEW FL 33578

*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:** COREY ROSE

AMBR

02/05/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date