

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000427173

**Entity Name:** 602 SALATO LLC

**Current Principal Place of Business:**

6450 NW 105TH TERRACE  
PARKLAND, FL 33076

**Current Mailing Address:**

6450 NW 105TH TERRACE  
PARKLAND, FL 33076 FL

**FEI Number:** 93-3407861

**Certificate of Status Desired:** No

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

JAMBHEKAR, DILIP V  
8260 NW 49TH MNR  
CORAL SPRINGS, FL 33067 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 MBR  
Name MIRIYALA, NARSINGARAO  
Address 6450 NW 105TH TERRACE  
City-State-Zip: PARKLAND FL 33076

Title AMBR  
Name ANIRUDHA, MIRIYALA  
Address 2777 COUNTY RD 202  
City-State-Zip: OXFORD FL 34484

Title AMBR  
Name NADIPELLI, MURALI  
Address 43353 CEDAR POND PLACE  
City-State-Zip: CHANTILLY VA 20152

Title AMBR  
Name PALLA, VENUGOPAL  
Address 212 SEAMAN NECK RD  
City-State-Zip: DIX HILLS NY 11746

*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:** NARSINGARAO MIRIYALA

**MANAGING DIRECTOR**

**04/05/2024**

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

\_\_\_\_\_  
Date