

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M17000006101

**Entity Name:** GRANIER MANAGEMENT USA LLC**Current Principal Place of Business:**18230 COLLINS AVENUE  
SUNNY ISLES BEACH, FL 33160**Current Mailing Address:**18230 COLLINS AVENUE  
SUNNY ISLES BEACH, FL 33160 US**FEI Number:** 36-4782348**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	MANAGER
Name	CONDE JIMENEZ, JUAN PEDRO
Address	18230 COLLINS AVENUE
City-State-Zip:	SUNNY ISLES BEACH FL 33160

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

Title	MANAGER
Name	WORLD OVENTURES, LLC
Address	5000 NORTH OCEAN BLVD APT# 1701
City-State-Zip:	LAUDERDALE BY THE SEA FL 33308

Title	AUTHORIZED REPRESENTATIVE
Name	MOLANO, ALEJANDRO
Address	18230 COLLINS AVENUE
City-State-Zip:	SUNNY ISLES BEACH 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:** JUAN PEDRO CONDE JIMENEZ

MANAGER

04/29/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date