

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000062877

**Entity Name:** MEDLEY NORTH LLC

**Current Principal Place of Business:**

9475 N.W. 89TH AVENUE  
MEDLEY, FL 33178

**Current Mailing Address:**

9475 N.W. 89TH AVENUE  
MEDLEY, FL 33178

**FEI Number: 26-3376308**

**Certificate of Status Desired: No**

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

ALBERT VARA  
9475 NW 89 TH AVE  
MIAMI, 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	VARA, ADALBERTO	Name	VARA, CARLOS A
Address	9475 N.W. 89TH AVENUE	Address	9475 N.W. 89TH AVENUE
City-State-Zip:	MEDLEY FL 33178	City-State-Zip:	MEDLEY FL 33178

*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: ADALBERTO VARA**

**MANAGER**

**01/19/2023**

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

\_\_\_\_\_  
Date