## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000019383

Entity Name: KAWA CAPITAL PARTNERS LLC

**Current Principal Place of Business:** 

1010 S. FEDERAL HIGHWAY SUITE 2900

HALLANDALE BEACH, FL 33009

**Current Mailing Address:** 

1010 S. FEDERAL HIGHWAY SUITE 2900 HALLANDALE BEACH, FL 33009 US

TIMELANDALL BEACH, TE 33003 00

FEI Number: 26-4345686 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ADES, DANIEL 1010 S. FEDERAL HIGHWAY SUITE 2900 HALLANDALE BEACH, FL 33009 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: DANIEL ADES 04/03/2023

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail :

Title MGR Title AUTHORIZED SIGNATORY

Name ADES, DANIEL Name SAVERIN, ALEXANDRE

Address 1010 S. FEDERAL HIGHWAY Address 1010 S. FEDERAL HIGHWAY

SUITE 2900 SUITE 2900

City-State-Zip: HALLANDALE BEACH FL 33009 City-State-Zip: HALLANDALE BEACH FL 33009

Title AUTHORIZED SIGNATORY Title AUTHORIZED SIGNATORY

Name BALDIM, CRISTINA Name LEMOS, CARLOS FELIPE

Address 1010 S. FEDERAL HIGHWAY Address 1010 S. FEDERAL HIGHWAY

SUITE 2900 SUITE 2900

City-State-Zip: HALLANDALE BEACH FL 33009 City-State-Zip: HALLANDALE BEACH FL 33009

Title AUTHORIZED SIGNATORY Title AUTHORIZED SIGNATORY

Name TRASTER, JEREMY Name LIU, XI

Address 1010 S. FEDERAL HIGHWAY Address 1010 S. FEDERAL HIGHWAY

SUITE 2900 SUITE 2900

City-State-Zip: HALLANDALE BEACH FL 33009 City-State-Zip: HALLANDALE BEACH FL 33009

Title AUTHORIZED SIGNATORY
Name AVELLAR, GUSTAVO

Name AVELLAR, GUSTAVO

1010 S. FEDERAL HIGHWAY SUITE 2900

Address

City-State-Zip: HALLANDALE BEACH FL 33009

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: CRISTINA BALDIM AUTHORIZED 04/03/2023 SIGNATORY

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Apr 03, 2023

Secretary of State

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