

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000072201

Entity Name: NAEUSSE, LLC**Current Principal Place of Business:**11995 SW 94 TERRACE
MIAMI, FL 33186**Current Mailing Address:**11995 SW 94 TERRACE
MIAMI, FL 33186 US**FEI Number:** 47-0992243**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LOWMAN LAW, P.A.
8620 NE 2 AVENUE
MIAMI, FL 33138 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:** MARCI LOWMAN, PRES

05/01/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name EUSSE, NOHORA A
Address 495 BRICKELL AVENUE UNIT 4708
City-State-Zip: MIAMI FL 33131

Title AMBR
Name MUNARRIZ, FERNANDO A
Address 495 BRICKELL AVENUE
UNIT 4708
City-State-Zip: MIAMI FL 33131

Title AMBR
Name MUNARRIZ, MIGUEL E
Address 495 BRICKELL AVENUE UNIT 4708
City-State-Zip: MIAMI FL 33131

Title AMBR
Name MUNARRIZ, VANESSA
Address 495 BRICKELL AVENUE UNIT 4708
City-State-Zip: MIAMI FL 33131

Title AMBR
Name MUNARRIZ, SANTIAGO
Address 495 BRICKELL AVENUE UNIT 4708
City-State-Zip: MIAMI FL 33131

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: NOHORA EUSSE

MGR

05/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date