

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000048413

**Entity Name:** HOUSES 4 LESS, LLC.

**Current Principal Place of Business:**

16211 SW 18 STREET  
MIRAMAR, FL 33027

**Current Mailing Address:**

16211 SW 18 STREET  
MIRAMAR, FL 33027 US

**FEI Number:** 46-3250620

**Certificate of Status Desired:** No

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

CORACELIN, WILLIAMS  
16211 SW 18TH STREET  
PEMBROKE PINES, FL 33027 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            PRESIDENT  
Name            CORACELIN, WILLIAMS  
Address        16211 SW 18 STREET  
City-State-Zip: MIRAMAR FL 33027

Title            VP  
Name            WILLIAMS JUNIOR CORACELIN  
Address        3625 SW 69TH AVENUE  
City-State-Zip: MIRAMAR FL 33023

Title            MGR  
Name            ASTRIDE CHELO ABSENCE  
Address        3625 SW 69 AVE  
City-State-Zip: MIRAMAR FL 33023

Title            MGR  
Name            CORACELIN, VALENCIA  
Address        3625 SW 69 AVE  
City-State-Zip: MIRAMAR FL 33023

Title            MGR  
Name            CORACELIN, ROBERTS  
Address        3625 SW 69 AVE  
City-State-Zip: MIRAMAR FL 33023

*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:** WILLIAMS CORACELIN

**PRESIDENT**

**02/06/2025**

Electronic Signature of Signing Authorized Person(s) Detail

Date