

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000076031

**Entity Name:** VAVIALE INVESTMENT, LLC

**Current Principal Place of Business:**

4080 TIMBER COVE LANE  
WESTON, FL 33332

**Current Mailing Address:**

CARE OF FLORIDA PROPERTY MANAGEMENT  
P.O. BOX 10  
BOCA RATON, FL 33429 US

**FEI Number:** 46-2863962

**Certificate of Status Desired:** No

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

PASAN INVESTMENT, INC  
2310 W WATERS AVE SUITE D  
TAMPA, FL 33604 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:** JUAN SANTAELLA

03/31/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name LEONARDO LUIS ZAVATTI  
RODRIGUEZ  
Address 4080 TIMBER COVE LANE  
City-State-Zip: WESTON FL 33332  
  
Title MGMR  
Name ZAVATTI AZZATO, VALERIA  
Address 4080 TIMBER COVE LN  
City-State-Zip: WESTON FL 33332

Title MGRM  
Name AZZATO SORDO, ALESSANDRA  
Address 4080 TIMBER COVE LANE  
City-State-Zip: WESTON FL 33332  
  
Title MGRM  
Name ZAVATTI AZZATO, VITTORIA  
Address 4080 TIMBER COVE LN  
City-State-Zip: WESTON FL 33332

*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:** AZZATO SORDO , ALESSANDRA

MGRM

03/31/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date