## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000053834

Entity Name: GANELLPA, LLC

**Current Principal Place of Business:** 

901 PONCE DE LEON BLVD. SUITE 204

CORAL GABLES, FL 33134

**Current Mailing Address:** 

901 PONCE DE LEON BLVD. SUITE 204

CORAL GABLES, FL 33134 US

FEI Number: APPLIED FOR Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALBORNOZ, WILLIAM H ESQ. 901 PONCE DE LEON BLVD. SUITE 204 CORAL GABLES, FL 33134 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: WILLIAM H. ALBORNOZ, ESQ. 03/27/2023

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGR

Name BACHER MARTINS, PAULO FELIPE

Address 901 PONCE DE LEON BLVD

SUITE 204

City-State-Zip: CORAL GABLES FL 33134

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: PAULO FELIPE BACHER MARTINS

**MANAGER** 

03/27/2023

FILED Mar 27, 2023

**Secretary of State** 

0957638452CC

Date