

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000138998

**Entity Name:** N6854H, LLC.

**Current Principal Place of Business:**

14850 NW 44TH COURT,  
SUITE 204  
OPA-LOCKA, FL 33054

**Current Mailing Address:**

14850 NW 44TH COURT,  
SUITE 204  
OPA-LOCKA, FL 33054 US

**FEI Number:** 47-4827813

**Certificate of Status Desired:** No

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

DONEL MARTINS, BEATRICE  
14850 NW 44TH COURT  
SUITE 204  
OPA-LOCKA, FL 33054 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:** BEATRICE DONEL MARTINS

04/23/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name DONEL, GERARD M  
Address 14850 NW 44TH COURT  
SUITE 204  
City-State-Zip: OPA LOCKA FL 33054  
  
Title MGR  
Name DONEL MARTINS, BEATRICE  
Address 14850 NW 44TH COURT  
SUITE 204  
City-State-Zip: OPA LOCKA FL 33054

Title MGR  
Name MARTINS, CARLOS  
Address 14850 NW 44TH COURT  
SUITE 204  
City-State-Zip: OPA LOCKA FL 33054  
  
Title AMBR  
Name FABIANO, DO NASCIMENTO  
MARCELO  
Address 14850 NW 44TH COURT,  
SUITE 204  
City-State-Zip: OPA-LOCKA FL 33054

*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:** BEATRICE DONEL MARTINS

MANEGER

04/23/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date