

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000042602

**Entity Name:** WALKER APARTMENTS, LLC

**Current Principal Place of Business:**

100 SW 22ND AVE  
APT 411  
MIAMI, FL 33135

**Current Mailing Address:**

100 SW 22ND AVE  
APT 411  
MIAMI, FL 33135 US

**FEI Number:** 81-1843778

**Certificate of Status Desired:** No

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

SOSA, MARCO ANTONIO  
5211 NW 17TH AVE.  
614  
MIAMI, FL 33142 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 MGRM  
Name SOSA, MARCO ANTONIO  
Address 100 SW 22ND AVE  
APT 411  
City-State-Zip: MIAMI FL 33135

Title MGRM  
Name SOSA, ASTRID  
Address 100 SW 22ND AVE  
APT 411  
City-State-Zip: MIAMI FL 33135

Title MGRM  
Name SOSA, MARCO  
Address 100 SW 22ND AVE  
APT 411  
City-State-Zip: MIAMI FL 33135

Title MGRM  
Name SOSA, GERARDO  
Address 100 SW 22ND AVE  
APT 411  
City-State-Zip: MIAMI FL 33135

*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:** SOSA , MARCO ANTONIO

MGRM

04/13/2023

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date