

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000088046

**Entity Name:** INVERSIONES FAMADASIL, LLC

**Current Principal Place of Business:**

15801 SW 54TH PL  
SOUTHWEST RANCHES, FL 33331

**Current Mailing Address:**

15801 SW 54TH PL  
SOUTHWEST RANCHES, FL 33331 US

**FEI Number:** 30-0940583

**Certificate of Status Desired:** No

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

DA SILVA, EDUARDO M  
9737 NW 41ST ST UNIT 704  
DORAL, FL 33178 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	AMBR	Title	AMBR
Name	DA SILVA, EDUARDO M	Name	BELLO ROMAN, MARIA A
Address	9737 NW 41ST ST UNIT 704	Address	15801 SW 54TH PL
City-State-Zip:	DORAL FL 33178	City-State-Zip:	SOUTHWEST RANCHES FL 33331

*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:** EDUARDO M DA SILVA

AMBR

01/26/2023

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

\_\_\_\_\_  
Date