

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000171318

Entity Name: LUPARE LLC

Current Principal Place of Business:

4520 NW 107 AVE
203
DORAL, FL 33178

Current Mailing Address:

4520 NW 107 AVE
203
DORAL, FL 33178

FEI Number: 38-4013699

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LUPO CHAKOUR, ROSANGELA
4520 NW 107 AVE
203
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
Name LUPO CHAKOUR, ROSANGELA
Address 4520 NW 107 AVE 203
City-State-Zip: DORAL FL 33172

Title AMBR
Name ARELLANO ASCANIO, DAVID A
Address 4520 NW 107 AVE 203
City-State-Zip: DORAL FL 33172

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: LUPO CHAKOUR ROSANGELA

HER

03/26/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date