## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000210975

Entity Name: ALBEV 2 LLC

**Current Principal Place of Business:** 

7751 KINGSPOINTE PKWY

SUITE 119 ORLANDO, FL 32819

**Current Mailing Address:** 

7751 KINGSPOINTE PKWY **SUITE 119** ORLANDO, FL 32819 US

FEI Number: 36-4852473 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOREIRA DE SOUZA NETO, ALFREDO 15989 CITRUS KNOLL DR WINTER GARDEN, FL 34787 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: ALFREDO MOREIRA DE SOUZA NETO 02/22/2024

Electronic Signature of Registered Agent

Date

**FILED** Feb 22, 2024

**Secretary of State** 

0886700355CC

Authorized Person(s) Detail:

Title **AMBR** Title **AMBR** 

MOREIRA DE SOUZA NETO, CERIONI SILVA MOREIRA DE SOUZA. Name Name

**ALFREDO** VERA CONCEICAO

15989 CITRUS KNOLL DR Address Address 15989 CITRUS KNOLL DR City-State-Zip: WINTER GARDEN FL 34787 WINTER GARDEN FL 34787 City-State-Zip:

Title **AMBR** 

Name SILVA MOREIRA DE SOUZA COELHO,

MARIA BEATRIZ

Address 15989 CITRUS KNOLL DR City-State-Zip: WINTER GARDEN FL 34787

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: MARIA BEATRIZ SILVA MOREIRA DE SOUZA

COELHO

**AMBR** 

02/22/2024