

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000024016

Entity Name: AHS RESIDENTIAL, LLC**Current Principal Place of Business:**12895 SW 132ND STREET
MIAMI, FL 33186**Current Mailing Address:**12895 SW 132ND STREET
MIAMI, FL 33186 US**FEI Number:** 30-0993248**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK, INC.
801 US HWY 1
NORTH PALM BEACH, FL 33408 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 MGR
Name LOPES, ERNESTO
Address 12895 SW 132ND STREET
City-State-Zip: MIAMI FL 33186

Title AR
Name MARCHANTE, OSVALDO J
Address 12895 SW 132ND STREET
City-State-Zip: MIAMI FL 33186

Title AR
Name CAIXETA, THIAGO
Address 12895 SW 132ND STREET
City-State-Zip: MIAMI FL 33186

Title AR
Name GONZALEZ, CARLOS E
Address 12895 SW 132ND STREET
City-State-Zip: MIAMI FL 33186

Title AR
Name BLAS, RICARDO
Address 12895 SW 132ND ST
City-State-Zip: MIAMI FL 33186

Title AR
Name FABRIZIO , BATISTA
Address 12895 SW 132ND STREET
City-State-Zip: MIAMI FL 33186

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: ERNESTO LOPES**MGR, BY JULIE PHILLIPS, 03/23/2023
ATTORNEY-IN-FACT**

Electronic Signature of Signing Authorized Person(s) Detail

Date