## **2023 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L17000044221

**Entity Name: ALLTOR SUPPLIES LLC** 

**Current Principal Place of Business:** 

3403 NW 82ND AVE SUITE 330 DORAL, FL 33122

**Current Mailing Address:** 

3403 NW 82ND AVE **SUITE 330** DORAL, FL 33122 US

FEI Number: 82-0686174 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSINESS FLORIDA SOLUTIONS, LLC 3403 NW 82ND AVE SUITE 330 DORAL, FL 33122 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: /AXEL GONZALEZ/ 10/03/2023

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

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

Name JAIMES TORRES, OSMAN E Name MATHEUS, WILLIAM 3403 NW 82ND AVE Address

3403 NW 82ND AVE Address SUITE 330

SUITE 330

**FILED** Oct 03, 2023

**Secretary of State** 

6619871795CR

City-State-Zip: DORAL FL 33122 City-State-Zip: DORAL FL 33122

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.

10/03/2023 SIGNATURE: MATHEUS, WILLIAM **AMBR**