**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**
**Apr 08, 2024**
**Secretary of State**
**3499772171CC**

DOCUMENT# L17000046999

**Entity Name:** CARLUCCI INTL. LLC

**Current Principal Place of Business:**

8822 WALBROOK ROAD
JACKSONVILLE, FL 32217

**Current Mailing Address:**

8822 WALBROOK ROAD
JACKSONVILLE, FL 32217 US

**FEI Number: 82-0680127**

**Certificate of Status Desired:** No

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

ALVARADO, CARLOS
8822 WALBROOK ROAD
JACKSONVILLE, FL 32217 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 | PS | Title | VPT |
| Name | ALVARADO, CARLOS | Name | ALVARADO, AUSTIN |
| Address | 8822 WALBROOK ROAD | Address | 8822 WALBROOK ROAD |
| City-State-Zip: | JACKSONVILLE FL 32217 | City-State-Zip: | JACKSONVILLE FL 32217 |

*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: CARLOS ALVARADO PS 04/08/2024

Electronic Signature of Signing Authorized Person(s) Detail — Date