

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000147589

**Entity Name:** MELIVA LLC

**Current Principal Place of Business:**

7900 W 30 CT  
HIALEAH, FL 33018

**Current Mailing Address:**

7900 W 30 CT  
HIALEAH, FL 33018

**FEI Number:** 82-2104076

**Certificate of Status Desired:** Yes

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

LEON, LILLIAM I  
7900 W 30 CT  
HIALEAH, FL 33018 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	Title	AMBR
Name	LEON, LILLIAM I	Name	AMADOR, MELVIN H
Address	2705 W 72ND PLACE	Address	7900 W 30 CT
City-State-Zip:	HIALEAH FL 33016	City-State-Zip:	HIALEAH FL 33018

*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:** MELVIN AMADOR

**OWNER**

**04/05/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date