

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000035359

**Entity Name:** ALLY TELECOMMUNICATIONS LLC

**Current Principal Place of Business:**

2500 N.W. 79TH AVENUE  
2ND FLOOR ED CENTRO DORAL OF 284  
DORAL, FL 33122

**Current Mailing Address:**

2500 N.W. 79TH AVENUE  
2ND FLOOR ED CENTRO DORAL OF 284  
DORAL, FL 33122 US

**FEI Number:** 30-1174721

**Certificate of Status Desired:** Yes

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

SANTAMARIA, JUAN C SR.  
2500 N.W. 79TH AVENUE  
2ND FLOOR ED CENTRO DORAL OF 284  
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:** JUAN SANTAMARIA

04/25/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title: MANAGER, AUTHORIZED REPRESENTATIVE  
Name: SANTAMARIA, JUAN C  
Address: 2500 N.W. 79TH AVENUE  
2ND FLOOR ED CENTRO DORAL OF 284  
City-State-Zip: DORAL FL 33122

Title: AUTHORIZED MEMBER  
Name: RAMIREZ, JOHAN M  
Address: 2500 N.W. 79TH AVENUE  
2ND FLOOR ED CENTRO DORAL OF 284  
City-State-Zip: DORAL FL 33122

Title: AUTHORIZED REPRESENTATIVE  
Name: JUEGUEN, RAMON PABLO  
Address: 2500 N.W. 79TH AVENUE  
2ND FLOOR ED CENTRO DORAL OF 284  
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.*

**SIGNATURE:** JUAN SANTAMARIA

MANAGER

04/25/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date