

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000200924

**Entity Name:** MAFANIKIO GROUP LLC**Current Principal Place of Business:**201 AMBER BLVD.  
AUBURNDALE, FL 33823**Current Mailing Address:**201 AMBER BLVD.  
AUBURNDALE, FL 33823 US**FEI Number:** 84-2764931**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**UNITED STATES CORPORATION AGENTS, INC.  
476 RIVERSIDE AVE.  
JACKSONVILLE, FL 32202 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	HUTCHINGS, WENDELL
Address	201 AMBER BLVD.
City-State-Zip:	AUBURNDALE FL 33823

Title	MGR
Name	JACQUES, DORIEN
Address	201 AMBER BLVD.
City-State-Zip:	AUBURNDALE FL 33823

Title	AMBR
Name	JACQUES, WAYNE A
Address	201 AMBER BLVD.
City-State-Zip:	AUBURNDALE FL 33823

Title	AMBR
Name	HUTCHINGS, WENDELL
Address	201 AMBER BLVD.
City-State-Zip:	AUBURNDALE FL 33823

Title	AMBR
Name	JACQUES, DORIEN
Address	201 AMBER BLVD.
City-State-Zip:	AUBURNDALE FL 33823

*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:** DORIEN JACQUES

PRESIDENT

04/23/2023

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