

**2021 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L20000027304

**FILED**  
**Oct 18, 2021**  
**Secretary of State**  
**3119786916CC**

**Entity Name:** MIAMI IBIZA WIRELESS LLC

**Current Principal Place of Business:**

848 BRICKELL AVE  
STE 602  
MIAMI, FL 33131

**Current Mailing Address:**

848 BRICKELL AVE  
STE 602  
MIAMI, FL 33131 US

**FEI Number:** 37-1964958

**Certificate of Status Desired:** Yes

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

REZENDE, TAYNARA  
848 BRICKELL AVE  
STE 602  
MIAMI, FL 33131 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           MANAGER  
Name           REZENDE, TAYNARA  
Address        848 BRICKELL AVE  
                  STE 602  
City-State-Zip: MIAMI FL 33131

Title           MANAGER  
Name           DE PAIVA RIBEIRO, LUCAS  
Address        848 BRICKELL AVE  
                  STE 602  
City-State-Zip: MIAMI FL 33131

Title           AMBR  
Name           MIW WHOLESALER CORP  
Address        350 S MIAMI AVE  
                  3602  
City-State-Zip: MIAMI FL 33130

*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:** TAYNARA GUIMARAES DE REZENDE

**MANAGER**

**10/18/2021**

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

\_\_\_\_\_  
Date