

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000083858

Entity Name: KAVALO, LLC**Current Principal Place of Business:**746 ARPAGE CT.
FORT MYERS, FL 33913**Current Mailing Address:**746 ARPAGE CT.
FORT MYERS, FL 33913 US**FEI Number:** 86-1487232**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AREVALO, IGNACIO JR
746 ARPAGE CT.
FORT MYERS, FL 33913 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 PRESIDENT
Name AREVALO, IGNACIO JR
Address 746 ARPAGE CT.
City-State-Zip: FORT MYERS FL 33913

Title AMBR
Name AREVALO, ROSALINDA R
Address 746 ARPAGE CT.
City-State-Zip: FORT MYERS FL 33913

Title AMBR
Name AREVALO, ROBBY L
Address 931 FRANKLIN STREET E
City-State-Zip: LEHIGH ACRES FL 33974

Title AUTHORIZED REPRESENTATIVE
Name NEWSON, RONDELL
Address 118 SW 21ST TERRACE
City-State-Zip: CAPE CORAL FL 33991

Title MANAGER
Name SAEZ, SAMUEL PATRICK
Address 614 POINSETTIA AVE
City-State-Zip: LEHIGH ACRES FL 33972

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: IGNACIO AREVALO, JR.**PRESIDENT****03/08/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date