

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000250174

**Entity Name:** ETLIAM LLC

**Current Principal Place of Business:**

8933 SW 172ND AVE  
1226  
MIAMI, FL 33196

**Current Mailing Address:**

8933 SW 172ND AVE  
1226  
MIAMI, FL 33196

**FEI Number:** 85-2768019

**Certificate of Status Desired:** No

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

LYLES, EDWARD T  
8933 SW 172ND AVE  
1226  
MIAMI, FL 33196 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 MGRM  
Name LYLES, EDWARD T  
Address 8933 SW 172ND AVE  
City-State-Zip: MIAMI FL 33196

Title MGR  
Name BROWN, MALEKA S  
Address 8933 SW 172ND AVE  
1226  
City-State-Zip: MIAMI FL 33196

*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:** EDWARD T LYLES

MGRM

04/20/2024

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

\_\_\_\_\_  
Date