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.

AMBR

SIGNATURE: MARIA DOMINGUEZ

Electronic Signature of Signing Authorized Person(s) Detail

DOMINGUEZ, MARIA 4474 WESTON RD DAVIE, FL 33331 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				03/24/2023
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	AMBR	Title	AMBR	
Name	DOMINGUEZ, MARIA	Name	CARDONA, GLORIA I	
Address	4474 WESTON RD SUITE 90	Address	4474 WESTON RD SUITE 90	
City-State-Zip:	DAVIE FL 33331	City-State-Zip:	DAVIE FL 33331	

# **Current Mailing Address:**

4474 WESTON RD SUITE 90 DAVIE, FL 33331 US

### FEI Number: 85-3325900

# Name and Address of Current Registered Agent:

**Current Principal Place of Business:** 

4474 WESTON RD SUITE 90 DAVIE, FL 33331

# 2023 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

### DOCUMENT# L20000302031 Entity Name: MACCA LLC

FILED Mar 24, 2023 Secretary of State 3869711534CC

Certificate of Status Desired: No

03/24/2023