

**2026 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000336778

**Entity Name:** VALLE DE PUNILLA, LLC

**Current Principal Place of Business:**

2400 SE VETERANS MEMORIAL PKWY  
SUITE 127  
PORT ST LUCIE, FL 34952

**Current Mailing Address:**

2400 SE VETERANS MEMORIAL PKWY  
SUITE 127  
PORT ST LUCIE, FL 34952 US

**FEI Number:** 85-3749192

**Certificate of Status Desired:** Yes

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

G2 REAL ESTATE INVESTMENTS, LLC  
2400 SE VETERANS MEMORIAL PKWY  
SUITE 127  
PORT ST LUCIE, FL 34952 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 DOWBENKA, LILIANA M  
Address TUCUMAN 1539  
FLOOR 9 - APT. 91  
City-State-Zip: CABA BUENOS AIRES 1050

Title MGR  
Name PAZ, FEDERICO  
Address TUCUMAN 1539  
FLOOR 9 - APT 91  
City-State-Zip: CABA BUENOS AIRES 1050

Title MGR  
Name PAZ, JUAN MANUEL  
Address TUCUMAN 1539  
FLOOR 9 - APT 91  
City-State-Zip: CABA BUENOS AIRES 1050

*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:** LILIANA DOWBENKA

**MGR**

**03/26/2026**

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

\_\_\_\_\_  
Date