

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000026127

Entity Name: MAFRIS BRICKELL LLC**Current Principal Place of Business:**433 NORTH LOOP W
HOUSTON, TX 77008**Current Mailing Address:**433 NORTH LOOP W
HOUSTON, TX 77008 US**FEI Number:** 86-1817880**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NORTHWEST REGISTERED AGENT LLC
7901 4TH ST N
STE 300
ST. PETERSBURG, FL 33702 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 ALONSO OLIVARES, FRANCISCO
Address 433 NORTH LOOP W
City-State-Zip: HOUSTON TX 77008

Title MANAGER
Name ALONSO MATUK, FRANCISCO
Address 433 NORTH LOOP W
City-State-Zip: HOUSTON TX 77008

Title MANAGER
Name MATUK CAJIGA, MONICA
Address 433 NORTH LOOP W
City-State-Zip: HOUSTON TX 77008

Title MANAGER
Name ALONSO OLIVARES, JORGE
EDUARDO
Address 433 NORTH LOOP W
City-State-Zip: HOUSTON TX 77008

Title MANAGER
Name ALONSO MATUK, ISABELA
Address 433 NORTH LOOP W
City-State-Zip: HOUSTON TX 77008

Title MANAGER
Name ALONSO MATUK, MARIA
Address 433 NORTH LOOP W
City-State-Zip: HOUSTON TX 77008

Title AMBR
Name MAFRIS HOLDING LLC
Address 433 NORTH LOOP W
City-State-Zip: HOUSTON TX 77008

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: ALONSO OLIVARES, FRANCISCO

MANAGER

04/24/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date