

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000135809

Entity Name: LUISA CHACON LLC

Current Principal Place of Business:

7245 NW 113TH CT
DORAL, FL 33178

Current Mailing Address:

7245 NW 113TH CT
DORAL, FL 33178

FEI Number: 86-3035330

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHACON, LUISA
7245 NW 113TH CT
DORAL, FL 33178 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 P
Name CHACON, LUISA
Address 7245 NW 113TH CT
City-State-Zip: DORAL FL 33178

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: LUISA CHACON

P

03/07/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date