

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000230679

**Entity Name:** BANK REPO LLC

**Current Principal Place of Business:**

20379 W COUNTRY CLUB DR  
APT 1434  
AVENTURA, FL 33180

**Current Mailing Address:**

20379 W COUNTRY CLUB DR  
APT 1434  
AVENTURA, FL 33180 US

**FEI Number:** 86-3910991

**Certificate of Status Desired:** No

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

SMITH BECERRA, NORMAN  
20379 W COUNTRY CLUB DR  
APT 1434  
AVENTURA, FL 33180 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:** NORMAN SMITH BECERRA

02/06/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name SMITH BECERRA , NORMAN  
Address 20379 W COUNTRY CLUB DR  
APT 1434  
City-State-Zip: AVENTURA FL 33180

*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:** SMITH BECERRA NORMAN

MGR

02/06/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date