

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000235748

Entity Name: ALARKIS LLC

Current Principal Place of Business:

354 NE 89TH ST
EL PORTAL, FL 33138

Current Mailing Address:

354 NE 89TH ST
EL PORTAL, FL 33138

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALARCON CABRERA, CAROLINA
354 NE 89TH ST
EL PORTAL, FL 33138 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 AMBR
Name ALARCON CABRERA, CAROLINA
Address 354 NE 89TH ST
City-State-Zip: EL PORTAL FL 33138

Title AMBR
Name ALARCON CABRERA, CLAUDIA JIMENA
Address 354 NE 89TH ST
City-State-Zip: EL PORTAL FL 33138

Title AMBR
Name ALARCON CABRERA, MARIA ALEJANDR
Address 354 NE 89TH ST
City-State-Zip: EL PORTAL FL 33138

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: CLAUDIA JIMENA ALARCON CABRERA

AMBR

02/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date