

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000302264

**Entity Name:** ALEJANDRO L. NIEVES LLC

**Current Principal Place of Business:**

207 NW 59 CT.  
MIAMI, FL 33126

**Current Mailing Address:**

207 NW 59 CT.  
MIAMI, FL 33126 US

**FEI Number:** 87-1640031

**Certificate of Status Desired:** No

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

NIEVES, ALEJANDRO L SR.  
207 NW 59 CT.  
MIAMI, FL 33126 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 NIEVES, ALEJANDRO L SR.  
Address 207 NW 59 CT.  
City-State-Zip: MIAMI FL 33126

*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:** ALEJANDRO NIEVES

AN

04/26/2024

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

\_\_\_\_\_  
Date