

**2022 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L21000333585

**Entity Name:** DEPOSTAL, LLC

**Current Principal Place of Business:**

1 ALHAMBRA PLAZA  
COLUMBUS CENTER PH  
CORAL GABLES, FL 33134

**Current Mailing Address:**

1 ALHAMBRA PLAZA  
COLUMBUS CENTER PH  
CORAL GABLES, FL 33134 US

**FEI Number:** 87-1809379

**Certificate of Status Desired:** No

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

USA GESTIONES, LLC  
990 BISCAYNE BLVD.  
STE. 501-16  
MIAMI, FL 33132 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 MBR  
Name ROMANO, ROSANA I  
Address 1 ALHAMBRA PLAZA  
COLUMBUS CENTER PH  
City-State-Zip: CORAL GABLES FL 33134

Title MBR  
Name SALVAT PALA, NURIA  
Address 1 ALHAMBRA PLAZA  
COLUMBUS CENTER PH  
City-State-Zip: CORAL GABLES FL 33134

Title MBR  
Name ROMANO, FERNANDO J  
Address 1 ALHAMBRA PLAZA  
COLUMBUS CENTER PH  
City-State-Zip: CORAL GABLES FL 33134

Title MBR  
Name RODRIGUEZ, MARIA J  
Address 1 ALHAMBRA PLAZA  
COLUMBUS CENTER PH  
City-State-Zip: CORAL GABLES FL 33134

*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:** ROSANA I ROMANO

MBR

10/05/2022

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

\_\_\_\_\_  
Date