

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000380208

**Entity Name:** 215 CARVER W, LLC

**Current Principal Place of Business:**

661 SE 5TH AVE  
POMPANO BEACH, FL 33060

**Current Mailing Address:**

9590 E. IRONWOOD SQUARE DR.  
SUITE 105  
SCOTTSDALE, AZ 85258 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MACIA, STEVE  
661 SE 5TH AVE  
POMPANO BEACH, FL 33060 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 RIBADENEIRA, EDWARD  
Address 9590 E. IRONWOOD SQUARE DR.  
#105  
City-State-Zip: SCOTTSDALE AZ 85258

Title MGR  
Name BRUSS, ADAM  
Address 904 DEER RIDGE RD  
City-State-Zip: SANDPOINT ID 83864

*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:** EDWARD RIBADENEIRA

MANAGER

01/26/2023

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

\_\_\_\_\_  
Date