

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000002634

**Entity Name:** 9117 NW 169 ST LLC

**Current Principal Place of Business:**

37400 SW 209 AVE  
HOMESTEAD, FL 33034

**Current Mailing Address:**

37400 SW 209 AVE  
HOMESTEAD, FL 33034

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MARTINEZ, ANA  
37400 SW 209 AVE  
HOMESTEAD, FL 33034 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 MARTINEZ, ANA  
Address 37400 SW 209 AVE  
City-State-Zip: HOMESTEAD FL 33034

Title AMBR  
Name MARTINEZ, ELOY  
Address 37400 SW 209 AVE  
City-State-Zip: HOMESTEAD FL 33034

*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:** ANA MARTINEZ

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03/07/2024

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

\_\_\_\_\_  
Date