

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000130213

**FILED**  
**Jan 30, 2023**  
**Secretary of State**  
**5651623231CC**

**Entity Name:** INVESTMENT GDH LLC

**Current Principal Place of Business:**

2893 EXECUTIVE PARK DR  
SUITE 109  
WESTON, FL 33331

**Current Mailing Address:**

2893 EXECUTIVE PARK DR  
SUITE 109  
WESTON, FL 33331 US

**FEI Number:** 88-1224246

**Certificate of Status Desired:** No

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

OXFORD CORONEL, DANIEL A  
2893 EXECUTIVE PARK DR  
SUITE 109  
WESTON, FL 33331 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 OC GROUP INTERNATIONAL LLC  
Address 2893 EXECUTIVE PARK DR  
SUITE 109  
City-State-Zip: WESTON FL 33331

Title AMBR  
Name QUICK SOLUTIONS RL INC  
Address 260 SW 19TH BD  
City-State-Zip: MIAMI FL 33129

Title MGR  
Name OXFORD CORONEL, DANIEL A  
Address 2893 EXECUTIVE PARK DR  
SUITE 109  
City-State-Zip: WESTON FL 33331

Title MGR  
Name LEON MANAURE, CARLOS A  
Address 2893 EXECUTIVE PARK DR  
SUITE 109  
City-State-Zip: WESTON FL 33331

Title MGR  
Name RODRIGUEZ MEDINA, LUIS A  
Address 260 SW 19TH BD  
City-State-Zip: MIAMI FL 33129

Title MGR  
Name CEPEDA RIVAS, ROGER A  
Address 260 SW 19TH BD  
City-State-Zip: MIAMI FL 33129

*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:** CARLOS A LEON MANAURE

**MGR**

**01/30/2023**

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

\_\_\_\_\_  
Date