

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000335423

**Entity Name:** WALLLE-S CASITA LLC

**Current Principal Place of Business:**

7671 QUIET CLOSE  
ROCKFORD, IL 61114

**Current Mailing Address:**

7488 NW 169TH TER  
HIALEAH, FL 33015

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

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

TANIA, SOTO M  
7671 QUIET CLOSE  
ROCKFORD, IL, FL 61114 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            MRS  
Name            SOTO, TANIA M  
Address        7488 NW 169TH TER  
City-State-Zip: HIALEAH FL 33015

*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:** TANIA SOTO

MRS.

04/27/2023

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

\_\_\_\_\_ Date