

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000372526

Entity Name: GX1 LLC**Current Principal Place of Business:**478 E. ALTAMONTE DRIVE
108-340
ALTAMONTE SPRINGS, FL 32701**Current Mailing Address:**478 E. ALTAMONTE DRIVE
108-340
ALTAMONTE SPRINGS, FL 32701 US**FEI Number:** 88-3924814**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DANNEL, JOHN E
217 N WESTMONTE DR
2018
ALTAMONTE SPRINGS, FL 32714 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	GUARDO GARCIA, JOSE MANUEL
Address	478 E. ALTAMONTE DRIVE, 108-340
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

Title	AMBR
Name	GUARDO GARCIA, JUAN MANUEL
Address	478 E. ALTAMONTE DRIVE, 108-340
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

Title	AMBR
Name	GUARDO GARCIA, ELLA MARIA
Address	478 E. ALTAMONTE DRIVE, 108-340
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

Title	AMBR
Name	GUARDO POLO, JOSE MANUEL
Address	478 E. ALTAMONTE DRIVE, 108-340
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

Title	SEC
Name	SHIMIZU FILHO, JIRO
Address	13205 SOUR ORANGE DRIVE, AVALON PARK
City-State-Zip:	ORLANDO FL 32828

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: JOSE MANUEL GUARDO GARCIA

AMBR

04/24/2023

Electronic Signature of Signing Authorized Person(s) Detail_____
Date