

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000527569

**Entity Name:** Q&P22 VENTURE LLC

**Current Principal Place of Business:**

8001 NW 41 ST  
APT 308  
DORAL, FL 33166

**Current Mailing Address:**

8001 NW 41 ST  
APT 308  
DORAL, FL 33166 US

**FEI Number:** 88-4411390

**Certificate of Status Desired:** No

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

QUICENO ALVAREZ , JAMES A  
8001 NW 41 ST  
APT 308  
DORAL , FL 33166 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:** JAMES A QUICENO ALVAREZ

04/02/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name QUICENO ALVAREZ, JAMES A  
Address 8001 NW 41 ST  
APT 308  
City-State-Zip: DORAL FL 33166

Title AMBR  
Name PAEZ RUBIANO, ANA S  
Address 8001 NW 41 ST  
APT 308  
City-State-Zip: DORAL FL 33166

Title AMBR  
Name QUICENO PAEZ, JOHNY D  
Address 8001 NW 41 ST  
APT 308  
City-State-Zip: DORAL FL 33166

Title AMBR  
Name QUICENO PAEZ, JAMES M  
Address 8001 NW 41 ST  
APT 308  
City-State-Zip: DORAL FL 33166

Title AMBR  
Name QUICENO PAEZ, CHRISTIAN D  
Address 8001 NW 41 ST  
APT 308  
City-State-Zip: DORAL FL 33166

Title AMBR  
Name QUICENO PAEZ, DANIELA  
Address 8001 NW 41 ST  
APT 308  
City-State-Zip: DORAL FL 33166

*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:** QUICENO ALVAREZ, JAMES A

AMBR

04/02/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date