

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000028954

**Entity Name:** ATP XXXX, LLC

**Current Principal Place of Business:**

8362 PINES BLVD  
STE 288  
PEMBROKE PINES, FL 33024

**Current Mailing Address:**

8362 PINES BLVD  
STE 288  
PEMBROKE PINES, FL 33024 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

GONZALEZ, MARIA  
8362 PINES BLVD  
STE 288  
PEMBROKE PINES, FL 33024 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:** MARIA GONZALEZ

04/30/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ALVAREZ, RODOLFO  
Address 8362 PINES BLVD  
STE 288  
City-State-Zip: PEMBROKE PINES FL 33024

Title MGR  
Name ALVAREZ, SEBASTIAN  
Address 8362 PINES BLVD  
STE 288  
City-State-Zip: PEMBROKE PINES FL 33024

*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:** ALVAREZ , RODOLFO

MGR

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date