

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000041087

**Entity Name:** JAVIER CONSULTING LLC

**Current Principal Place of Business:**

7365 WEST 4TH AVE  
APT 4  
HIALEAH, FL 33014

**Current Mailing Address:**

7365 WEST 4TH AVE  
APT 4  
HIALEAH, FL 33014

**FEI Number:** 92-3863131

**Certificate of Status Desired:** No

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

JAVIER-WILLIAMS, CRISTIAN K  
7365 WEST 4TH AVE  
APT 4  
HIALEAH, FL 33014 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 AR  
Name JAVIER, CRISTIAN K  
Address 7365 WEST 4TH AVE APT 4  
City-State-Zip: HIALEAH FL 33014

*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:** CRISTIAN JAVIER WILLIAMS

**MANAGER**

**03/05/2024**

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

\_\_\_\_\_  
Date