## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000221603

Entity Name: ALFA WAYS LLC

**Current Principal Place of Business:** 

1825 NW CORPORATE BLVD 110 BOLKO

BOCA RATON, FL 33431

## **Current Mailing Address:**

1825 NW CORPORATE BLVD 110 BOLKO BOCA RATON, FL 33431

FEI Number: APPLIED FOR Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

R. BOLKO, CPA P.A 2933 W CYPRESS CREEK ROAD SUITE 202 FORT LAUDERDALE, FL 33309 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

FILED Apr 29, 2024

**Secretary of State** 

4084765815CC

Authorized Person(s) Detail:

Title MGR Title MGR

Name SZCZESNY, WOJCIECH Name ROGóż, DANIEL

Address FREISLERA 8/43 Address KRYNICKA 82

City-State-Zip: NOWY SÄCZ NA 33300 City-State-Zip: NAWOJOWA NA 33335

Title MGR

Name KASIECZKA, RAFAÅ Address 22510 KATZMAN ST

City-State-Zip: CLINTON TOWNSHIP MI 48035

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: SZCZESNY WOJCIECH N

Electronic Signature of Signing Authorized Person(s) Detail

**MANAGER** 

04/29/2024