

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000404739

Entity Name: ESCORCIA ARAMBURO LLC**Current Principal Place of Business:**10352 W BAY HARBOR DR. APT 6P
BAY HARBOR, FL 33156**Current Mailing Address:**10352 W BAY HARBOR DR. APT 6P
BAY HARBOR, FL 33156 US**FEI Number:** 99-5017329**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JC BUSINESS SOLUTIONS INC
7500 NW 25TH ST SUITE 237
DORAL, FL 33122 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 MGRM
Name ESCORCIA ARAMBURO, JUAN M
Address 10352 W BAY HARBOR DR. APT 6P
City-State-Zip: BAY HARBOR FL 33156

Title MGRM
Name ESCORCIA ARAMBURO, FERNANDO
Address 10352 W BAY HARBOR DR. APT 6P
City-State-Zip: BAY HARBOR FL 33156

Title MGRM
Name ESCORCIA, EDUARDO
Address 10352 W BAY HARBOR DR. APT 6P
City-State-Zip: BAY HARBOR FL 33156

Title MGR
Name ESCORCIA, TOMAS
Address 10352 W BAY HARBOR DR. APT 6P
City-State-Zip: BAY HARBOR FL 33156

Title MGRM
Name ARAMBURO DE ESCORCIA, ANGELA
B
Address 10352 W BAY HARBOR DR. APT 6P
City-State-Zip: BAY HARBOR FL 33156

Title MGRM
Name TOCALIMA USA LLC
Address 10352 W BAY HARBOR DR. APT 6P
City-State-Zip: BAY HARBOR FL 33156

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: TOMAS ESCORCIA**MANAGER****04/30/2025**

Electronic Signature of Signing Authorized Person(s) Detail

Date