

**2022 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A21000000632

**Entity Name:** GAARY FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP

**FILED**  
**Mar 02, 2022**  
**Secretary of State**  
**5817971952CC**

**Current Principal Place of Business:**

1500 NW 89 COURT  
SUITE 117  
DORAL, FL 33172

**Current Mailing Address:**

1500 NW 89 COURT  
SUITE 117  
DORAL, FL 33172 US

**FEI Number: APPLIED FOR**

**Certificate of Status Desired: No**

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

TOLLEY, RACHEL  
2600 S DOUGLAS ROAD  
SUITE 1008  
CORAL GABLES, FL 33134 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

**General Partner Detail :**

Document #

Name RODRIGUEZ, GRIELA

Address 1500 NW 89 COURT SUITE 117

City-State-Zip: DORAL FL 33172

*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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: GRIELA CHIROLDE RODRIGUEZ**

**PARTNER**

**03/02/2022**

\_\_\_\_\_  
Electronic Signature of Signing General Partner Detail

\_\_\_\_\_  
Date