

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000058003

**Entity Name:** SPACE FLORAL, LLC

**Current Principal Place of Business:**

1224 ASTURIA AVE  
CORAL GABLES, FL 33134

**Current Mailing Address:**

PO BOX 143711  
CORAL GABLES, FL 33114 US

**FEI Number:** 87-0804262

**Certificate of Status Desired:** No

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

MORENO, GUSTAVO  
1224 ASTURIA AVE  
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

**Authorized Person(s) Detail :**

Title MGRM  
Name MORENO, GUSTAVO  
Address 1224 ASTURIA AVE  
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR  
Name MORENO, GABRIEL GUSTAVO  
Address 1224 ASTURIA AVENUE  
City-State-Zip: CORAL GABLES FL 33134

*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:** GABRIEL GUSTAVO MORENO

**DIRECTOR**

**02/26/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date