

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000072356

**Entity Name:** INTERNATIONAL RECREATIONAL PRODUCTS, LLC.

**Current Principal Place of Business:**

8350 NW 52ND TER  
SUITE 301  
MIAMI, FL 33166

**Current Mailing Address:**

8350 NW 52ND TER  
SUITE 301 #1062  
MIAMI, FL 33166 US

**FEI Number:** 45-5394611

**Certificate of Status Desired:** No

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

MENDEZ, MARIA A  
8350 NW 52ND TERRACE STE 301  
DORAL, FL 33166 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	MANAGER	Title	MANAGER
Name	ASSUNCAO, GABRIELA	Name	MENDEZ, MARIA A
Address	8350 NW 52ND TER SUITE 301 #1062	Address	8350 NW 52ND TER SUITE 301 #1062
City-State-Zip:	MIAMI FL 33166	City-State-Zip:	MIAMI FL 33166
Title	MGR		
Name	DE ASSUNCAO MORA, GABRIELLA MEGDA		
Address	8350 NW 52ND TER SUITE 301 #1062		
City-State-Zip:	DORAL FL 33166		

*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:** MARIA A MENDEZ

**MANAGER**

**04/03/2024**

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

\_\_\_\_\_  
Date