

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000068263

**Entity Name:** EUROPEAN PARTNER LLC

**Current Principal Place of Business:**

6383 10TH AVE N  
SUITE F  
GREENACRES, FL 33463

**Current Mailing Address:**

6383 10TH AVE N  
SUITE F  
GREENACRES, FL 33463 US

**FEI Number:** 42-1775159

**Certificate of Status Desired:** No

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

ARMAN, OKAN  
6303 SHADOW TREE LANE  
LAKE WORTH, FL 33463 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:** OKAN ARMAN

03/07/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name ARMAN, OKAN  
Address 6303 SHADOW TREE LANE  
City-State-Zip: LAKE WORTH FL 33463

*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:** OKAN ARMAN

MGRM

03/07/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date