

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000121899

Entity Name: RAFMAK ASSOCIATES, LLC**Current Principal Place of Business:**1835 EAST HALLANDALE BEACH BLVD.
SUITE # 339
HALLANDALE, FL 33009**Current Mailing Address:**1835 EAST HALLANDALE BEACH BLVD.
SUITE # 339
HALLANDALE, FL 33009 US**FEI Number:** 46-3564850**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GALUSTYANTS, GABRIELLA
1835 EAST HALLANDALE BEACH BLVD.
SUITE # 339
HALLANDALE, FL 33009 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:** GABRIELLA GALUSTYANTS

02/03/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name GALUSTYANTS, GABRIELLA
Address 1835 E HALLANDALE BEACH BLVD
339
City-State-Zip: HALLANDALE FL 33009

Title MGRM
Name KOBLENCE, LEONARD LAZAR
Address 1835 EAST HALLANDALE BEACH
BLVD.
SUITE # 339
City-State-Zip: HALLANDALE FL 33009

Title MGRM
Name GALUSTYANTS, JONATHAN
Address 1835 EAST HALLANDALE BEACH
BLVD.
SUITE # 339
City-State-Zip: HALLANDALE FL 33009

Title MGRM
Name KOBLENCE, SORAYA MIKAELA
Address 1835 EAST HALLANDALE BEACH
BLVD.
SUITE # 339
City-State-Zip: HALLANDALE FL 33009

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: GABRIELLA GALUSTYANTS

MGRM

02/03/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date