

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000048389

**Entity Name:** 3904 ICOM LLC

**Current Principal Place of Business:**

8249 NW 36 ST.  
STE 109  
DORAL, FL 33166

**Current Mailing Address:**

8249 NW 36 ST.  
STE 109  
DORAL, FL 33166 US

**FEI Number:** 46-5176258

**Certificate of Status Desired:** No

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

BRIAN PRZYSTUP & ASSOCIATES LLC  
275 NE 18TH ST  
310  
MIAMI, FL 33132 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	Title	VP/D
Name	MASRI PALMA, VIOLET E	Name	MASRI PALMA, MARIA DE LOURDES
Address	8249 NW 36 ST. STE 109	Address	8249 NW 36 ST. STE 109
City-State-Zip:	DORAL FL 33166	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:** MASRI PALMA VIOLET

**MGR**

**03/10/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date