

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000107913

**Entity Name:** 8TH STREET MISSION LLC**Current Principal Place of Business:**3263 NW 61ST STREET  
BOCA RATON, FL 33496**Current Mailing Address:**3263 NW 61ST STREET  
BOCA RATON, FL 33496 US**FEI Number:** 37-1719894**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FINIZIO, PAUL G  
3263 NW 61ST STREET  
BOCA RATON, FL 33496 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	MGR
Name	FINIZIO, PAUL
Address	3263 NW 61ST STREET
City-State-Zip:	BOCA RATON FL 33496

Title	TREASURER
Name	FINIZIO, BARBARA
Address	3263 NW 61ST STREET
City-State-Zip:	BOCA RATON FL 33496

Title	AUTHORIZED REPRESENTATIVE
Name	FINIZIO, MICHELLE
Address	3263 NW 61ST STREET
City-State-Zip:	BOCA RATON FL 33496

Title	AUTHORIZED REPRESENTATIVE
Name	FINIZIO, NICOLETTE
Address	3263 NW 61ST STREET
City-State-Zip:	BOCA RATON FL 33496

Title	AUTHORIZED REPRESENTATIVE
Name	FINIZIO, CHRISTINA
Address	3263 NW 61ST STREET
City-State-Zip:	BOCA RATON FL 33496

*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:** BARBARA FINIZIO**OFFICER****01/22/2024**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date