

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000192702

**Entity Name:** 5185 6TH WAY LLC

**Current Principal Place of Business:**

ASCHEBRODELWEG 5A  
WIESBADEN, HESS 65199

**Current Mailing Address:**

N. NOJUMI  
6012 PRATT STREET  
TAMPA, FL 33647 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

SCHWALM, HORACIO E  
6012 PRATT STREET  
TAMPA, FL 33647 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	Title	DIRECTOR
Name	NOJUMI, NEAMAT	Name	NOJUMI, NEAMAT
Address	ASCHEBRODELWEG 5A	Address	ASCHEBRODELWEG 5A
City-State-Zip:	WIESBADEN 65199	City-State-Zip:	WIESBADEN 65199

*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:** NEAMAT NOJUMI

**DIRECTOR**

**02/10/2024**

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

\_\_\_\_\_  
Date