

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000025713

**Entity Name:** NAKED HOMES LLC

**Current Principal Place of Business:**

1725 W 60TH ST  
F323  
HIALEAH, FL 33012

**Current Mailing Address:**

1725 W 60TH ST  
F323  
HIALEAH, FL 33012 US

**FEI Number:** 82-0661873

**Certificate of Status Desired:** No

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

TAX MEDIC CORPORATE SERVICES LLC  
7911 NW 72ND AVE SUITE  
SUITE 223-A  
MEDLEY, FL 33166 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 CRUZ, JOEY L  
Address 1725 W 60 ST # F323  
City-State-Zip: HIALEAH FL 33012

*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:** JOEY L CRUZ

**MGR**

**05/01/2019**

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

\_\_\_\_\_  
Date