

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000061049

Entity Name: FLOWER CHILD FLORIST LLC

Current Principal Place of Business:

18142 POWERLINE RD
DADE CITY , FL 33525

Current Mailing Address:

PO BOX 423
SAN ANTONIO, FL 33576 US

FEI Number: 82-0869977

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLOWER CHILD FLORIST
18142 POWERLINE RD
DADE CITY , FL 33525 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: JORDAN MONBARREN

01/17/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name MONBARREN-DOBBIE, JORDAN
Address 32983 DRAKE ESTATES WAY
City-State-Zip: DADE CITY FL 33525

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: JORDAN MONBARREN-DOBBIE

MANAGER

01/17/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date