

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000244176

**Entity Name:** BM FLIPPING LLC

**Current Principal Place of Business:**

5416 NW 72 AVE  
MIAMI, FL 33166

**Current Mailing Address:**

10951 SW 60 AVE  
PINECREST, FL 33156 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

HOYOS, CATALINA  
10951 SW 60 AVE  
PINECREST, FL 33156 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	MGR
Name	JARAMILLO, JUAN	Name	JARAMILLO, JUAN
Address	10951 SW 60 AVE	Address	10951 SW 60 AVE
City-State-Zip:	PINECREST FL 33156	City-State-Zip:	PINECREST FL 33156

*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:** JUAN JARAMILLO

**MANAGER**

**01/17/2023**

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

\_\_\_\_\_  
Date