

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000193362

**Entity Name:** HM5 LLC

**Current Principal Place of Business:**

4807 LULLABY LANE  
KISSIMMEE, FL 34746

**Current Mailing Address:**

7550 FUTURES DRIVE  
SUITE 306  
ORLANDO, FL 32819 US

**FEI Number:** 30-1125090

**Certificate of Status Desired:** No

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

FLORIDA TAX HOUSE LLC  
7550 FUTURES DRIVE  
SUITE 306  
ORLANDO, FL 32819 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 M CABRAL MORAES, CAROLINA B  
Address 4807 LULLABY LANE  
City-State-Zip: KISSIMMEE FL 34746

Title AMBR  
Name B M C M LINS, HELOISA T  
Address 4807 LULLABY LANE  
City-State-Zip: KISSIMMEE FL 34746

Title AMBR  
Name CAVALCANTI LINS, MARCIO  
Address 4807 LULLABY LANE  
City-State-Zip: KISSIMMEE FL 34746

*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:** M CABRAL MORAES , CAROLINA B

MGR

02/06/2021

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

\_\_\_\_\_ Date