

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000244951

**Entity Name:** SHOPOK LLC

**Current Principal Place of Business:**

12850 W. STATE RD. 84 , # 2-13  
DAVIE, FL 33325

**Current Mailing Address:**

12850 W. STATE RD. 84 , # 2-13  
DAVIE, FL 33325 US

**FEI Number:** 84-3353782

**Certificate of Status Desired:** No

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

OKSANA, KOTIAEVA  
12850 W. STATE RD. 84 , # 2-13  
DAVIE, FL 33325 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 AMBR  
Name OKSANA, KOTIAEVA  
Address 12850 W. STATE RD. 84 , # 2-13  
City-State-Zip: DAVIE FL 33325

Title AMBR  
Name OLEG, KOTIAEV  
Address 12850 W. STATE RD. 84 , # 2-13  
City-State-Zip: DAVIE FL 33325

*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:** OKSANA KOTIAEVA

SHOPOK

04/20/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date