

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000286686

**Entity Name:** SHA GROUP LLC

**Current Principal Place of Business:**

2297 NE 164 ST  
NORTH MIAMI BEACH, FL 33160

**Current Mailing Address:**

2297 NE 164 ST  
NORTH MIAMI BEACH, FL 33160 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

MARTIN, ALEJANDRO  
2297 NE 164 ST  
NORTH MIAMI BEACH, FL 33160 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            HERFLOR LLC  
Address        2297 NE 164 ST  
City-State-Zip: NORTH MIAMI BEACH FL 33160

Title            AMBR  
Name            FM PROS INC  
Address        2297 NE 164 ST  
City-State-Zip: NORTH MIAMI BEACH FL 33160

*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:** ALEJANDRO MARTIN

**AGENT**

**02/01/2024**

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

\_\_\_\_\_  
Date