Current Ma	iling Address:			
1549 NE 12				
NORTH MIA	AMI, FL 33161 US			
FEI Number: 38-4139107			Certificate of Status Desired: No	
Name and A	Address of Current Registered Agent:			
1549 NE 123R	Г & MANAGEMENT, INC. D ST , FL 33161 US			
1549 NE 123R NORTH MIAMI	D ST	its registered office or regis	tered agent, or both, in the State of Flo	orida.
1549 NE 123R NORTH MIAMI The above name	D ST , FL 33161 US	its registered office or regis	tered agent, or both, in the State of Flo	orida. 04/01/2024
1549 NE 123R NORTH MIAMI The above name	D ST , FL 33161 US d entity submits this statement for the purpose of changing	its registered office or regis	tered agent, or both, in the State of Flo	
1549 NE 123R NORTH MIAMI The above name SIGNATURI	D ST , FL 33161 US d entity submits this statement for the purpose of changing E: MOSES NAE	its registered office or regis	tered agent, or both, in the State of Flo	04/01/2024
1549 NE 123RI NORTH MIAMI The above name SIGNATURI	D ST , FL 33161 US d entity submits this statement for the purpose of changing E: MOSES NAE Electronic Signature of Registered Agent	its registered office or regis	tered agent, or both, in the State of Flo	04/01/2024
1549 NE 123RI NORTH MIAMI The above name SIGNATURI Authorized	D ST , FL 33161 US d entity submits this statement for the purpose of changing E: MOSES NAE Electronic Signature of Registered Agent Person(s) Detail :			04/01/2024
1549 NE 123RI NORTH MIAMI The above name SIGNATURI Authorized Title	D ST , FL 33161 US d entity submits this statement for the purpose of changing E: MOSES NAE Electronic Signature of Registered Agent Person(s) Detail : AR	Title	AR	04/01/2024

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L20000007205

Entity Name: GEOENERGIA AMERICA LLC

Current Principal Place of Business:

1549 NE 123RD ST NORTH MIAMI, FL 33161

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: RACIOPPI, GUSTAVO HECTOR

AR

04/01/2024 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 01, 2024 Secretary of State 2924583597CC