

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000078808

**Entity Name:** NOVUS DESIGNS, LLC

**Current Principal Place of Business:**

6180 NW 2ND STREET  
MARGATE, FL 33063

**Current Mailing Address:**

6180 NW 2ND STREET  
MARGATE, FL 33063 US

**FEI Number: 84-5189185**

**Certificate of Status Desired: Yes**

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

TORRES, ARMANDO S  
6180 NW 2ND STREET  
MARGATE, FL 33063 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 TORRES, ARMANDO  
Address 6180 NW 2ND STREET  
City-State-Zip: MARGATE FL 33063

Title AMBR  
Name ROMERO, JOSE A  
Address 6180 NW 2ND STREET  
City-State-Zip: MARGATE FL 33063

Title AMBR  
Name ROMERO, DARWIN  
Address 6180 NW 2ND STREET  
City-State-Zip: MARGATE FL 33063

*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: ARMANDO TORRES**

**AMBR**

**09/18/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date