

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000104513

**Entity Name:** FL HAPPY FAMILY SOLUTIONS LLC

**Current Principal Place of Business:**

3944 PINE BREEZE RD S  
JACKSONVILLE, FL 32257

**Current Mailing Address:**

3944 PINE BREEZE RD S  
JACKSONVILLE, FL 32257 US

**FEI Number:** 85-0892146

**Certificate of Status Desired:** Yes

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

LANDRIAN DIAZ, LISBEL  
3944 PINE BREEZE RD S  
JACKSONVILLE, FL 32257 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 FERNANDEZ RUIZ, OSMEL J  
Address 3944 PINE BREEZE RD S  
City-State-Zip: JACKSONVILLE FL 32256

Title AMBR  
Name DIAZ, LISBEL LANDRIA  
Address 3944 PINE BREEZE RD S  
City-State-Zip: JACKSONVILLE FL 32256

*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:** OSMEL J FERNANDEZ RUIZ

MR

02/10/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date