# 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L20000165272

#### Entity Name: C.M.C.S POLISH LLC

### **Current Principal Place of Business:**

5860 SOUTHWEST 70TH AVENUE DAVIE, FL 33314

## **Current Mailing Address:**

5860 SOUTHWEST 70TH AVENUE DAVIE, FL 33314 US

## FEI Number: 85-1823314

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

CHAPELIN LLANES, YAMIL 5860 SOUTHWEST 70TH AVENUE DAVIE, FL 33314 US

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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

## Authorized Person(s) Detail :

| Title           | MGR                    | Title           | MANAGER                    |
|-----------------|------------------------|-----------------|----------------------------|
| Name            | CHAPELIN LLANES, YAMIL | Name            | BEN SHMUEL, LIZA           |
| Address         | 3290 N 37TH TER        | Address         | 5860 SOUTHWEST 70TH AVENUE |
| City-State-Zip: | HOLLYWOOD FL 33021     | City-State-Zip: | DAVIE FL 33314             |

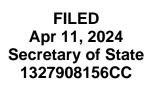
I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered 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: LIZA BEN SHMUEL

LIZA BEN SHMUEL

04/11/2024

Electronic Signature of Signing Authorized Person(s) Detail



Certificate of Status Desired: No

Date