

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000210270

Entity Name: REPASS FAMILY TRUST LLC

Current Principal Place of Business:

515 E LAS OLAS BLVD.
SUITE 120
FT LAUDERDALE, FL 33301

Current Mailing Address:

515 E LAS OLAS BLVD.
SUITE 120
FT LAUDERDALE, FL 33301 US

FEI Number: 85-1525143

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INNA ALEKSEENKO-REPASS
515 E LAS OLAS BLVD
SUITE #120
FT LAUDERDALE, FL 33301 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 REPASS FAMILY TRUST
Address 515 E LAS OLAS BLVD.
SUITE 120
City-State-Zip: FT LAUDERDALE FL 33301

Title MGR
Name INNA ALEKSEENKO-REPASS
Address 515 E LAS OLAS BLVD SUITE 120
City-State-Zip: FT LAUDERDALE FL 33301

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: INNA ALEKSEENKO-REPASS

MANAGER

04/11/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date