## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000214119 Entity Name: 1STOPRO LLC

**Current Principal Place of Business:** 

66 W FLAGLER STREET, SUITE 900

MIAMI, FL 33130

**Current Mailing Address:** 

66 W FLAGLER STREET, SUITE 900 MIAMI, FL 33130 US

FEI Number: 85-2210902 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MONTAGUE, JASON 3270 SW 190TH AVE MIRAMAR, FL 33029 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: JASON MONTAGUE 02/19/2024

Electronic Signature of Registered Agent

Date

**FILED** Feb 19, 2024

**Secretary of State** 

1321187989CC

Authorized Person(s) Detail:

Title **AMBR** Title **AMBR** 

MONTAGUE, JASON Name SHENK, GREGORY Name 3270 SW 190TH AVE Address 15 WRIGHT ST Address

City-State-Zip: MIRAMAR FL 33029 City-State-Zip: ARLINGTON MA 02474

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: JASON MONTAGUE

02/19/2024

**MEMBER** 

Date