

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000271558

**Entity Name:** ONSS BROTHERS LLC

**Current Principal Place of Business:**

5936 FL-71  
MALONE, FL 32445

**Current Mailing Address:**

837 WASHINGTON AVE  
NEW ORLEANS, LA 70130 US

**FEI Number:** 85-3365166

**Certificate of Status Desired:** No

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

SAROOP, SHIRVIN  
5936 FL-71  
MALONE, FL 32445 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 ASSING, NICOLE  
Address 837 WASHINGTON AVE  
City-State-Zip: NEW ORLEANS LA 70130

Title MGR  
Name SAROOP, SHIRVIN  
Address 837 WASHINGTON AVE  
City-State-Zip: NEW ORLEANS LA 70130

*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:** SHIRVIN SAROOP

MR

01/30/2024

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date