

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000310016

**Entity Name:** DOMUS AUREA INTERIORS LLC

**Current Principal Place of Business:**

1000 E. HALLANDALE BEACH BLVD.  
STE 1-108  
HALLANDALE BEACH, FL 33009

**Current Mailing Address:**

1000 E. HALLANDALE BEACH BLVD.  
STE 1-108  
HALLANDALE BEACH, FL 33009 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

MONCARZ LAW FIRM PL  
401 E. LAS OLAS BLVD  
STE 1400  
FORT 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 MGR  
Name FERMIN, MARIA  
Address 1000 E. HALLANDALE BEACH BLVD.  
STE 1-108  
City-State-Zip: HALLANDALE BEACH FL 33009

Title MGR  
Name IADISERNIA, GABRIELA  
Address 1000 E. HALLANDALE BEACH BLVD.  
STE 1-108  
City-State-Zip: HALLANDALE BEACH FL 33009

Title MGR  
Name MARIA, MARLENE  
Address 1000 E. HALLANDALE BEACH BLVD.  
STE 1-108  
City-State-Zip: HALLANDALE BEACH FL 33009

*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:** MARIA FERMIN

**MANAGER**

**03/14/2024**

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

\_\_\_\_\_  
Date