

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000042970

Entity Name: FLORIDAMADEMG LLC

Current Principal Place of Business:

300 NW 97TH ST
MIAMI, FL 33150

Current Mailing Address:

PO BOX 350969
JACKSONVILLE, FL 32235 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NOEL, WARREN
300 NW 97TH ST
MIAMI, FL 33150 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 MANAGER
Name NOEL, WARREN
Address 300 NW 97TH ST
City-State-Zip: MIAMI FL 33150

Title MGR
Name VITAL, MARCELINE
Address 300 NW 97TH ST
City-State-Zip: MIAMI FL 33150

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: MARCELINE VITAL

MANAGER

04/30/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date