# 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: LUIS A. SANCHEZ AUTHORIZED MANAGER 05/01/2022

Electronic Signature of Signing Authorized Person(s) Detail

# Entity Name: L & M FLORIDA SUN PROPERTIES LLC

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### Current Principal Place of Business:

1175 CYPRESS POINTE BLVD. DAVENPORT, FL 33896

DOCUMENT# L21000089298

## **Current Mailing Address:**

11464 NW 43RD TERRACE DORAL, FL 33178

## FEI Number: NOT APPLICABLE

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

SANCHEZ, LUIS A 11464 NW 43RD TERRACE DORAL, FL 33178 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

#### Authorized Person(s) Detail :

Title	AMBR	Title	AMBR
Name	SANCHEZ, LUIS A	Name	SANCHEZ, MARIA E
Address	11464 NW 43RD TERRACE	Address	11464 NW 43RD TERRACE
City-State-Zip:	DORAL FL 33178	City-State-Zip:	DORAL FL 33178

AUTHORIZED MANAGER

Date

#### FILED May 01, 2022 Secretary of State 8348770302CC

Certificate of Status Desired: No

Date