## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L21000136874

Entity Name: BLOSSOM USA LLC

### **Current Principal Place of Business:**

2020 PONCE DE LEON BLVD STE 904 CORAL GABLES, FL 33134

## **Current Mailing Address:**

PMB# 502 14422 SHORESIDE WAY, SUITE 110 STE 850 WINTER GARDEN, FL 34787 US

## FEI Number: 86-3196824

### Name and Address of Current Registered Agent:

AVALON INCORPORATORS LLC 2020 PONCE DE LEON BLVD STE 904 CORAL GABLES, FL 33134 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	MGR	Title	CORPORATE SECRETARY;	
	Name	3411 SILVERSIDE ROAD		AUTHORIZED SIGNER	
			Name	TORO, CYNTHIA	
	Address				
			Address	2020 PONCE DE LEON BLVD., SUITE	
	City-State-Zip:	WILMINGTON DE 19810		904	
			City-State-Zip:	CORAL GABLES FL 33134	

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.

MGR

# SIGNATURE: CARLOS FIALLO

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 23, 2024 Secretary of State 4242258147CC

Certificate of Status Desired: No

Date

02/23/2024 Date