

2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L21000506962

Entity Name: VIVES NURSERY LLC

Current Principal Place of Business:

467 E 43RD ST
HIALEAH, FL 33013-2355

Current Mailing Address:

467 E 43RD ST
HIALEAH, FL 33013-2355

FEI Number: 99-4496970

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLANCA OLIVA VIVES
467 E 43RD ST
HIALEAH, FL 33013-2355 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 AMBR
Name BLANCA OLIVA VIVES
Address 467 E 43RD ST
City-State-Zip: HIALEAH FL 33013-2355

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: BLANCA OLIVA VIVES

AMBR

09/05/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date