

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000090748

**Entity Name:** HPM3 LLC

**Current Principal Place of Business:**

1962 NW 181 AVENUE  
PEMBROKE PINES, FL 33029-3011

**Current Mailing Address:**

1962 NW 181 AVENUE  
PEMBROKE PINES, FL 33029-3011 US

**FEI Number:** 87-4793610

**Certificate of Status Desired:** No

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

RABIN, JEFFREY B  
1962 NW 181 AVENUE  
PEMBROKE PINES, FL 33029-3011 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                         | Title           | MGR                          |
| Name            | RABIN, JEFFREY B             | Name            | RABIN, JEREMY B              |
| Address         | 1962 NW 181 AVENUE           | Address         | 1962 NW 181 AVENUE           |
| City-State-Zip: | PEMBROKE PINES FL 33029-3011 | City-State-Zip: | PEMBROKE PINES FL 33029-3011 |

*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:** JEFFREY BRUCE RABIN

AMBR

02/03/2024

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

\_\_\_\_\_  
Date