

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000173647

**Entity Name:** GREEN FIELD FLORIDA, LLC

**Current Principal Place of Business:**

15805 BISCAYNE BLVD STE 201  
AVENTURA, FL 33160

**Current Mailing Address:**

15805 BISCAYNE BLVD STE 201  
AVENTURA, FL 33160 US

**FEI Number: 37-2046858**

**Certificate of Status Desired: No**

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

CSI RA LLC  
15805 BISCAYNE BLVD STE 201  
AVENTURA, FL 33160 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            ABRAHAO COSTA, GUSTAVO  
Address        15805 BISCAYNE BLVD STE 201  
City-State-Zip: AVENTURA FL 33160

Title            AMBR  
Name            CONTER RIBEIRO COSTA, JULIA  
Address        15805 BISCAYNE BLVD STE 201  
City-State-Zip: AVENTURA FL 33160

Title            AMBR  
Name            CONTER COSTA, VALENTINA  
Address        15805 BISCAYNE BLVD STE 201  
City-State-Zip: AVENTURA FL 33160

Title            AMBR  
Name            CONTER COSTA, MARINA  
Address        15805 BISCAYNE BLVD STE 201  
City-State-Zip: AVENTURA FL 33160

*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: JULIA CONTER RIBEIRO COSTA**

**AMBR**

**03/13/2023**

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

\_\_\_\_\_  
Date