

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000182943

**Entity Name:** BEE GS FLOWERS LLC

**Current Principal Place of Business:**

4811 NW 167TH ST  
MIAMI GARDENS, FL 33055

**Current Mailing Address:**

4106 SAN CLEMENTE COURT  
NORTH FORT MYERS, FL 33917 US

**FEI Number:** 88-2079962

**Certificate of Status Desired:** No

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

VILLARREAL, SAHONY  
4106 SAN CLEMENTE COURT  
NORTH FORT MYERS, FL 33917 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:** SAHONY VILLARREAL

05/01/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name VILLARREAL, SAHONY  
Address 4106 SAN CLEMENTE COURT  
City-State-Zip: NORTH FORT MYERS FL 33917

Title MGR  
Name VILLARREAL, RENE O  
Address 4106 SAN CLEMENTE COURT  
City-State-Zip: NORTH FORT MYERS FL 33917

Title MGR  
Name PEREZ, GISBETH  
Address 18936 NW 57TH AVE APT 101  
City-State-Zip: HIALEAH FL 33015

Title MGR  
Name PEREZ, ARELIS  
Address 18936 NW 57TH AVE APT 101  
City-State-Zip: HIALEAH FL 33015

*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:** SAHONY VILLARREAL

MANAGER

05/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date