

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000208071

**Entity Name:** 1099MARINE, LLC

**Current Principal Place of Business:**

6175 NW 153 STREET  
SUITE 303  
MIAMI LAKES, FL 33014

**Current Mailing Address:**

6175 NW 153 STREET  
SUITE 303  
MIAMI LAKES, FL 33014

**FEI Number:** 88-2082881

**Certificate of Status Desired:** No

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

STROEHMANN, HAROLD  
6175 NW 153 STREET  
SUITE 303  
MIAMI LAKES, FL 33014 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 MBR  
Name STROEHMANN, HAROLD  
Address 6175 NW 153 STREET, SUITE 303  
City-State-Zip: MIAMI LAKES FL 33014

*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:** HAROLD JOHN STROEHMANN

**PRES**

**01/29/2024**

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

\_\_\_\_\_  
Date