

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000309449

**Entity Name:** TRUE ART EXPERIENCE LLC

**Current Principal Place of Business:**

739 WASHINGTON AVE  
1982  
HOMESTEAD, FL 33030

**Current Mailing Address:**

739 WASHINGTON AVE  
1982  
HOMESTEAD, FL 33030

**FEI Number:** 88-3401803

**Certificate of Status Desired:** No

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

ORTIZ, JULIAN  
739 WASHINGTON AVE  
1982  
HOMESTEAD, FL 33030 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           MGR  
Name           ORTIZ, JULIAN  
Address        739 WASHINGTON AVE  
City-State-Zip: HOMESTEAD FL 33030

*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:** JULIAN ORTIZ

**MGR**

**02/09/2024**

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

\_\_\_\_\_  
Date