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: MARTA MARIA DE ANDRADE

Electronic Signature of Signing Authorized Person(s) Detail

# FEI Number: 88-3690837

COCONUT CREEK. FL 33066

DOCUMENT# L22000346545

2020 NW 34TH AVE

COCONUT CREEK, FL 33066

**Current Mailing Address:** 

2020 NW 34TH AVE

**Current Principal Place of Business:** 

### Name and Address of Current Registered Agent:

DE ANDRADE, MARTA MARIA 2020 NW 34TH AVE COCONUT CREEK, FL 33066 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

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: MMA PROFESSIONAL DESIGN SERVICES LLC

## Authorized Person(s) Detail :

Title	MGR	Title	AMBR
Name	DE ANDRADE, MARTA MARIA	Name	DE ANDRADE, MARTA MARIA
Address	2020 NW 34TH AVE	Address	2020 NW 34TH AVE
City-State-Zip:	COCONUT CREEK FL 33066	City-State-Zip:	COCONUT CREEK FL 33066

Certificate of Status Desired: No

Date

04/27/2023 Date

MANAGER