#### SIGNATURE: CARLOS A. JOYA MGR

Electronic Signature of Signing Authorized Person(s) Detail

# 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000376776

Entity Name: JOYRIDE EXPERIENCES LLC

#### **Current Principal Place of Business:**

2900 NE 7TH AVENUE 2404 MIAMI, FL 33137

### **Current Mailing Address:**

2900 NE 7TH AVENUE 2404 MIAMI, FL 33137

#### FEI Number: 88-3908325

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

Electronic Signature of Registered Agent

O'CONNOR & RODRIGUEZ, PA 660 NE 95 STREET SUITE 7 MIAMI SHORES, FL 33138 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:

### Authorized Person(s) Detail .

| Authorized Person(s) Detail : |                           |                 |                              |
|-------------------------------|---------------------------|-----------------|------------------------------|
| Title                         | MGR                       | Title           | MGR                          |
| Name                          | JOYA, CARLOS A            | Name            | CHROMATIC SERVICES LLC       |
| Address                       | 2900 NE 7TH AVE. APT 2404 | Address         | 2045 BISCAYNE BLVD SUITE 273 |
| City-State-Zip:               | MIAMI FL 33137            | City-State-Zip: | MIAMI FL 33137               |

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

## FILED Apr 08, 2024 Secretary of State 2533728108CC

Certificate of Status Desired: No

that my name appears above, or on an attachment with all other like empowered. 04/08/2024

Date

Date