

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000382102

Entity Name: REMER, GEORGES-PIERRE & HOOGERWOERD, PLLC**Current Principal Place of Business:**2745 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134**Current Mailing Address:**2745 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134 US**FEI Number: 88-4059318****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**REMER, JASON
2745 PONCE DE LEON BLVD
CORAL GABLE, FL 33134 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	REMER, JASON
Address	2745 PONCE DE LEON BLVD
City-State-Zip:	CORAL GABLE FL 33134

Title	MGR
Name	GEORGES-PIERRE, ANTHONY
Address	2745 PONCE DE LEON BLVD.
City-State-Zip:	CORAL GABLES FL 33134

Title	MGR
Name	HOOGERWOERD, PETER
Address	2745 PONCE DE LEON BLVD
City-State-Zip:	CORAL GABLES FL 33134

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: JASON REMER**MANAGER****01/30/2023**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date