

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000475651

**Entity Name:** RISE N SHINE BY CAM, LLC

**Current Principal Place of Business:**

1528 WHITEHALL DRIVE  
APT 206  
DAVIE, FL 33324

**Current Mailing Address:**

1528 WHITEHALL DRIVE  
APT 206  
DAVIE, FL 33324 US

**FEI Number:** 88-4282947

**Certificate of Status Desired:** Yes

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

MEDINA, CLAUDIA A  
1528 WHITEHALL DRIVE  
APT 206  
DAVIE, FL 33324 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 AR  
Name MEDINA, CLAUDIA A  
Address 1528 WHITEHALL DR APT 206  
City-State-Zip: DAVIE FL 33324

*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:** CLAUDIA A MEDINA

AR

04/30/2023

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

\_\_\_\_\_  
Date