

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000516986

Entity Name: AUTOMATED SOLUTIONS LLC

Current Principal Place of Business:

2800 ISLAND BOULEVARD
APT 1503 APT 1503
AVENTURA, FL 33160

Current Mailing Address:

2800 ISLAND BOULEVARD
APT 1503 APT 1503
AVENTURA, FL 33160 US

FEI Number: 92-1661244

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COHEN, SADY
2800 ISLAND BOULEVARD
APT 1503 APT 1503
AVENTURA, FL 33160 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 COHEN, SADY
Address 2800 ISLAND BOULEVARD, APT 1503
APT 1503
City-State-Zip: AVENTURA FL 33160

Title OWNER
Name COHEN, ISAAC
Address 2800 ISLAND BOULEVARD
APT 1503
City-State-Zip: AVENTURA FL 33160

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: SADY COHEN

MGR

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date