

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000085190

**Entity Name:** 3 GROVE ISLE C903, LLC

**Current Principal Place of Business:**

3 GROVE ISLE  
UNIT C-903  
MIAMI, FL 33133

**Current Mailing Address:**

3 GROVE ISLE  
UNIT C-903  
MIAMI, FL 33133 US

**FEI Number:** 35-2844277

**Certificate of Status Desired:** Yes

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

FEANNY, SUZANNE  
1515 SUNSET DR  
MIAMI, FL 33143 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           MANAGER  
Name           BLISSETT, JACQUELINE D  
Address        14260 SW 133RD AVE  
City-State-Zip: MIAMI FL 33186

*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:** JACQUELINE BLISSETT

**MANAGER**

**04/19/2024**

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

\_\_\_\_\_  
Date