

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000450704

Entity Name: GO MAIDS LLC

Current Principal Place of Business:

1989 NE 163 RD ST
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

1989 NE 163 RD ST
NORTH MIAMI BEACH, FL 33162

FEI Number: 93-3735490

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FONSECA, DIEGO
5040 FRATTINA ST
AVE MARIA, FL 34142 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	Title	MGR
Name	LOZANO, VIVIANA	Name	ALVAREZ, CARLOS
Address	1989 NE 163 RD ST	Address	1989 NE 163 RD ST
City-State-Zip:	NORTH MIAMI BEACH FL 33162	City-State-Zip:	NORTH MIAMI BEACH FL 33162

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: VIVIANA LOZANO

MANAGER

02/21/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date