

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000470348

**Entity Name:** S.S.L. SUPPLIES LLC

**Current Principal Place of Business:**

2530 NW SERVICE ROAD  
OPA LOCKA, FL 33054

**Current Mailing Address:**

2530 NW SERVICE ROAD  
OPA LOCKA, FL 33054 US

**FEI Number:** 93-3936332

**Certificate of Status Desired:** No

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

BARTUSTE, JOEL A  
2530 NW SERVICE ROAD  
OPA LOCKA, FL 33054 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            AMBR  
Name            BARTUSTE, JOEL A  
Address        2530 NW SERVICE ROAD  
City-State-Zip: OPA LOCKA FL 33054

Title            AMBR  
Name            OBREGON, EDILBERTO  
Address        2530 NW SERVICE ROAD  
City-State-Zip: OPA LOCKA FL 33054

*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:** BARTUSTE , JOEL A

AMBR

04/22/2024

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

\_\_\_\_\_ Date