## **2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000043121

Entity Name: TROPICARS,LLC

**Current Principal Place of Business:** 

13691 SW 145 CT MIAMI, FL 33186

**Current Mailing Address:** 

13691 SW 145 CT MIAMI, FL 33186 US

FEI Number: 27-2830950 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

EVANS, JAMES CESQ. 13691 SW 145 CT MIAMI, FL 33186 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

FILED Feb 02, 2024

**Secretary of State** 

0238968414CC

Authorized Person(s) Detail :

Title MGRM

Name EVANS, JAMES CESQ.

Address 13551 SW 132 AVENUE

City-State-Zip: MIAMI FL 33186

Title MGRM

Name JONES, CATHERINE L Address 13551 SW 132 AVENUE

City-State-Zip: MIAMI FL 33186

Title P

Name SOKOLOWSKY, T J
Address 13691 SW 145 CT
City-State-Zip: MIAMI FL 33186

Title MGRM

Name KELLER, LYNNE E

Address 13551 SW 132 AVENUE

City-State-Zip: MIAMI FL 33186

Title MEMBER

Name EVANS, LAURIE
Address 13691 SW 145 CT
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: JAMES C. EVANS

**CEO** 

02/02/2024