

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000126369

**Entity Name:** ARTI MARIN ELECTRIC, LLC

**Current Principal Place of Business:**

401 E LAS OLAS BLVD  
SUITE 130-109  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

401 E LAS OLAS BLVD,  
SUITE 130-109  
FT. LAUDERDALE, FL 33301 US

**FEI Number:** 99-0370649

**Certificate of Status Desired:** No

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

OZAR, ERKMEN MUSTAFA  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:** ERKMEN OZAR

04/26/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name OZAR, ERKMEN M  
Address 401 E LAS OLAS BLVD  
SUITE 130-109  
City-State-Zip: FORT LAUDERDALE FL 33301

Title MGRM  
Name CIPRUT, ALPER  
Address 8 COLTRANE DR  
City-State-Zip: TORONTO ONTARIO L4J9A7

Title MGRM  
Name POYANLI, KAAAN  
Address 401 E LAS OLAS BLVD, SUITE 130-109  
City-State-Zip: FT. LAUDERDALE FL 33301

Title MGRM  
Name EROL, ERDAL  
Address 401 E LAS OLAS BLVD, SUITE 130-109  
City-State-Zip: FT. LAUDERDALE FL 33301

*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:** MUSTAFA ERKMEN OZAR

**MANAGER**

04/26/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date