

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000003342

**Entity Name:** SOAMI, LLC

**Current Principal Place of Business:**

333 SE 1ST AVE  
FLORIDA CITY, FL 33034

**Current Mailing Address:**

409 SE 1ST AVE  
FLORIDA CITY, FL 33034

**FEI Number:** 46-3979805

**Certificate of Status Desired:** No

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

PATEL, PREMSARAN A  
409 SE 1ST AVE  
FLORIDA CITY, FL 33034 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 MGRM  
Name PATEL, PREMSARAN A  
Address 2712 AUGUSTA DR  
City-State-Zip: HOMESTEAD FL 33035

Title MGRM  
Name PATEL, BHARTI P  
Address 2712 AUGUSTA DR  
City-State-Zip: HOMESTEAD FL 33035

Title AUTHORIZED MEMBER, MANAGER  
Name PATEL, AMAR PREMSARAN  
Address 409 SE 1ST AVE.  
City-State-Zip: FLORIDA CITY FL 33034

*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:** AMAR P. PATEL

**MANAGER**

**01/23/2023**

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

\_\_\_\_\_  
Date