

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000044500

**Entity Name:** APART FLORIDA LLC

**Current Principal Place of Business:**

1850 S OCEAN DR  
3702A  
HALLANDALE, FL 33009

**Current Mailing Address:**

1850 S OCEAN DR  
3702A  
HALLANDALE, FL 33009

**FEI Number:** 81-1711577

**Certificate of Status Desired:** No

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

BUSHUEV, PAVEL  
1850 S OCEAN DR  
3702A  
HALLANDALE, FL 33009 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  
Name BUSHUEV, PAVEL  
Address 1850 S OCEAN DR 3702A  
City-State-Zip: HALLANDALE FL 33009

*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:** PAVEL BUSHUEV

**PRESIDENT**

**04/26/2023**

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

\_\_\_\_\_  
Date