

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000219429

Entity Name: GEMINI COMMUNICATIONS, LLC

Current Principal Place of Business:

12595 SW 137TH AVE.
SUITE 208
MIAMI, FL 33186

FILED
Apr 29, 2024
Secretary of State
7703690819CC

Current Mailing Address:

12595 SW 137TH AVE.
SUITE 208
MIAMI, FL 33186 US

FEI Number: 82-3635195

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HALLEY, DIANA T
12595 SW 137TH AVE.
SUITE 208
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: DIANA T. HALLEY

04/29/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name WALKER, BENJAMIN H JR
Address 12595 SW 137TH AVE.
SUITE 208
City-State-Zip: MIAMI FL 33186

Title MGR
Name WALKER, TAYLOR
Address 12595 SW 137TH AVE.
SUITE 208
City-State-Zip: MIAMI FL 33186

Title MGR, SECRETARY
Name GRUDZIECKI, TERESA
Address 12595 SW 137TH AVE.
SUITE 208
City-State-Zip: MIAMI FL 33186

Title MGR
Name BERNSTEIN, STEPHEN J
Address 12595 SW 137TH AVE.
SUITE 208
City-State-Zip: MIAMI FL 33186

Title MGR
Name PARKER, LEONARD
Address 12595 SW 137TH AVE.
SUITE 208
City-State-Zip: MIAMI FL 33186

Title EXEC. VICE PRESIDENT
Name MORIARITY, WILLIAM B. III
Address 12595 SW 137TH AVE.
SUITE 208
City-State-Zip: MIAMI FL 33186

Title COO
Name HERNANDEZ, RALPH E.
Address 12595 SW 137TH AVE.
SUITE 208
City-State-Zip: MIAMI FL 33186

Title CEO
Name HUBBARD, RICHARD L.
Address 12595 SW 137TH AVE.
SUITE 208
City-State-Zip: MIAMI FL 33186

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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: DIANA T. HALLEY

AUTHORIZED REP.

04/29/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title AUTHORIZED REP
Name HALLEY, DIANA T.
Address 12595 SW 137TH AVE.
SUITE 208
City-State-Zip: MIAMI FL 33186