

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000059587

**Entity Name:** REED HARTMAN GROOMS DEVELOPMENT LLC

**FILED**  
**Jan 24, 2023**  
**Secretary of State**  
**0335466040CC**

**Current Principal Place of Business:**

2665 SOUTH BAYSHORE DRIVE  
STE 801  
COCONUT GROVE, FL 33133

**Current Mailing Address:**

2665 SOUTH BAYSHORE DRIVE  
STE 801  
COCONUT GROVE, FL 33133 US

**FEI Number:** 82-4679328

**Certificate of Status Desired:** No

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

KALLIVOKAS, CHRISTOPHER  
2665 SOUTH BAYSHORE DRIVE  
STE 801  
COCONUT GROVE, FL 33133 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 KALLIVOKAS, CHRISTOPHER  
Address 2665 SOUTH BAYSHORE DRIVE  
STE 801  
City-State-Zip: COCONUT GROVE FL 33133

Title MGR  
Name SMYJUNAS, J. ROBERT  
Address 2665 S. BAYSHORE DR  
SUITE 801  
City-State-Zip: COCONUT GROVE FL 33133

Title MGR  
Name MEDINA, DANIEL  
Address 2665 SOUTH BAYSHORE DR  
SUITE 801  
City-State-Zip: COCONUT GROVE FL 33133

*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:** CHRISTOPHER KALLIVOKAS

**MANAGER**

**01/24/2023**

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

\_\_\_\_\_  
Date