

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000158334

**Entity Name:** EDWARD A. FILPES LLC

**Current Principal Place of Business:**

8181 SW 189 ST.  
CUTLER BAY, FL 33157

**Current Mailing Address:**

8181 SW 189 ST.  
CUTLER BAY, FL 33157 US

**FEI Number:** 47-4987730

**Certificate of Status Desired:** No

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

EDWARD A. FILPES, LLC  
8181 SW 189 ST  
CUTLER BAY, FL 33157 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:** EDWARD A FILPES

01/26/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	AMBR	Title	AUTHORIZED REPRESENTATIVE
Name	FILPES, EDWARD A	Name	FILPES, BELKYS L
Address	8181 SW 189 ST.	Address	8181 SW 189 ST.
City-State-Zip:	CUTLER BAY FL 33157	City-State-Zip:	CUTLER BAY FL 33157

*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:** EDWARD FILPES

AMBR

01/26/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date