

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000227594

**Entity Name:** SHADDAI WORKS LLC

**Current Principal Place of Business:**

900 NORTHWEST 123RD STREET  
NORTH MIAMI, FL 33168

**Current Mailing Address:**

1710 4TH AVE N  
BLDG 4 403  
LAKE WORTH BEACH, FL 33460 US

**FEI Number:** 83-2041685

**Certificate of Status Desired:** No

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

FLEURIMOND, MIKE  
1710 4TH AVE N  
BLDG 4 UNIT 403  
LAKE WORTH, FL 33460 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            AMBR  
Name            FLEURIMOND, MIKE  
Address        900 NORTHWEST 123RD STREET  
City-State-Zip: NORTH MIAMI FL 33168

*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:** MIKE R FLEURIMOND

**OWNER**

**03/10/2023**

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

\_\_\_\_\_  
Date