

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000137859

**Entity Name:** FLORIDA DSO LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

604 MAITLAND AVE  
ALTAMONTE SPRINGS, FL 32701

**Current Mailing Address:**

132 STONE HILL DR  
MAITLAND, FL 32751 UN

**FEI Number:** 84-2071509

**Certificate of Status Desired:** No

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

ALSHAREEF, AMER  
132 STONE HILL DR  
MAITLAND, FL 32751 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	Title	MGR
Name	MOUSA, AMMAR	Name	ALSHAREEF, AMER
Address	5427 TILDENS GROVE BLVD	Address	132 STONE HILL DR
City-State-Zip:	WINDERMERE FL 34785	City-State-Zip:	MAITLAND FL 32751

*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:** AMER ALSHAREEF

**OWNER**

**01/29/2023**

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

\_\_\_\_\_  
Date