

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000137978

Entity Name: BEST PRACTICE CITIES, LLC

Current Principal Place of Business:

3616 HARLANO ST
CORAL GABLES, FL 33134--7120

Current Mailing Address:

3616 HARLANO ST
CORAL GABLES, FL 33134--7120 US

FEI Number: 84-1955598

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SWANSON, CATHERINE B
3616 HARLANO ST
CORAL GABLES, FL 33134--7120 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 AP
Name SWANSON, CATHERINE B
Address 3616 HARLANO ST
City-State-Zip: CORAL GABLES FL 33134--7120

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: CATHERINE B. SWANSON

FOUNDER

01/30/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date