## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000268086

**Entity Name: COCOLOVE LLC** 

**Current Principal Place of Business:** 

3407 S MACDILL AVE TAMPA, FL 33629

**Current Mailing Address:** 

3407 S MACDILL AVE TAMPA, FL 33629 US

FEI Number: 84-3649419 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ILIC, SIMONE A 3407 S MACDILL AVE TAMPA, FL 33629 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: SIMONE ILIC 01/03/2025

Electronic Signature of Registered Agent

Date

Date

FILED Jan 03, 2025

**Secretary of State** 

3410140225CC

Authorized Person(s) Detail:

Title MGR Title AMBR

NameTAYLOR, KIMBERLY ANameTAYLOR, KIMBERLYAddress7300 2ND AVE SAddress7300 2ND AVE S

City-State-Zip: ST PETERSBURG FL 33707 City-State-Zip: ST PETERSBURG FL 33707

Title MGR Title AMBR

NameILIC, SIMONE ANameILIC, SIMONE AAddress3407 S MACDILL AVEAddress3407 S MACDILL AVECity-State-Zip:TAMPA FL 33629City-State-Zip:TAMPA FL 33629

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: SIMONE ILIC AMBR 01/03/2025