

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000139609

Entity Name: RIMA'S NATURALS, LLC**Current Principal Place of Business:**609 ROSEDALE AVE
SAINT CLOUD, FL 34769**Current Mailing Address:**609 ROSEDALE AVE
SAINT CLOUD, FL 34769 US**FEI Number:** 88-2561389**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FOUST, KATHLEEN M
1083 E LAKESHORE BLVD
KISSIMMEE, FL 34744 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
Name	FOUST, CAROLINE L
Address	609 ROSEDALE AVE
City-State-Zip:	SAINT CLOUD FL 34769

Title	MGR
Name	PARRA ALVARADO, JOSE FRANCISCO
Address	609 ROSEDALE AVE
City-State-Zip:	SAINT CLOUD FL 34769

Title	AR
Name	FOUST, ABIGAIL J
Address	93 REDWOOD DR
City-State-Zip:	BOZEMAN MT 59718-9006

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: CAROLINE FOUST**OWNER****01/22/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date