## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000257472

Entity Name: FLOW FAM FL, LLC

FILED Feb 14, 2024 Secretary of State 3612331331CC

## **Current Principal Place of Business:**

7695 SW 104TH ST SUITE 100 PINECREST, FL 33156

## **Current Mailing Address:**

7695 SW 104TH ST SUITE 100 PINECREST, FL 33156

FEI Number: 85-2827645 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WARMAN, REBECA 7695 SW 104TH ST SUITE 100 PINECREST, FL 33156 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 AMBR

Name WARMAN, REBECA Name WARMAN, REBECA

Address 7695 SW 104TH ST SUITE 100 Address 7695 SW 104TH ST SUITE 100

City-State-Zip: PINECREST FL 33156 City-State-Zip: PINECREST FL 33156

Title MGR Title AMBR

Name BEN-HORIN, VIVIAN Name BEN-HORIN, VIVIAN

Address 200 W 26TH STREET, APT 6E Address 200 W 26TH STREET, APT 6E

City-State-Zip: NEW YORK FL 10001 City-State-Zip: NEW YORK FL 10001

Title AMBR

Name BEN-HORIN, ADAM

Address 200 W 26TH STREET, APT 6E

City-State-Zip: NEW YORK FL 10001

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: REBECA WARMAN MANAGER 02/14/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date