

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000287783

**Entity Name:** NINEARTSLESSONS LLC

**Current Principal Place of Business:**

859 NE 121ST STREET  
NORTH MIAMI, FL 33161

**Current Mailing Address:**

859 NE 121ST STREET  
NORTH MIAMI, FL 33161 UN

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

SOUTO, CAROLINA  
859 NE 121ST STREET  
NORTH MIAMI, FL 33161 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	SOUTO, CAROLINA	Name	GARCIA-RIBBI, ARTURO
Address	859 NE 121ST STREET	Address	859 NE 121ST STREET
City-State-Zip:	NORTH MIAMI FL 33161	City-State-Zip:	NORTH MIAMI FL 33161

*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:** SOUTO, CAROLINA

**MANAGER**

**03/12/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date