

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000087007

Entity Name: MAKOV LLC

Current Principal Place of Business:

7712 NW 5 ST
BROWARD, FL 33324

Current Mailing Address:

430 NE 177TH ST
NORTH MIAMI BEACH, FL 33162 US

FEI Number: 87-3350208

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JEAN POIX, SANDRO
7712 NW 5 ST
PLANTATION, FL 33324 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	AP
Name	JEAN POIX, SANDRO M	Name	JEAN POIX, MYRNOYE
Address	7712 NW 5 ST	Address	7712 NW 5 ST
City-State-Zip:	BROWARD FL 33324	City-State-Zip:	BROWARD FL 33324

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: SANDRO JEAN POIX

MANAGER

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date