

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000191448

**Entity Name:** DOLLI MAE LLC

**Current Principal Place of Business:**

468 NW 207TH  
301  
MIAMI GARDENS , FL 33168

**Current Mailing Address:**

468 NW 207TH  
301  
MIAMI GARDENS , FL 33169 UN

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

ROBINSON, GWENDOLYN D  
468 NW 207TH  
301  
MIAMI GARDENS , FL 33169 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 ROBINSON, GWENDOLYN D  
Address 468 NW 207TH  
301  
City-State-Zip: MIAMI GARDENS FL 33169

*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:** GWENDOLYN D ROBINSON

**MANAGER**

**04/30/2024**

\_\_\_\_\_

Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_

Date