

**2023 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L21000214463

**Entity Name:** CHM FUTURE, LLC**Current Principal Place of Business:**5030 CHAMPION BLVD  
G11 - BOX 144  
BOCA RATON, FL 33496**Current Mailing Address:**5030 CHAMPION BLVD  
G11 - BOX 144  
BOCA RATON, FL 33496 US**FEI Number:** 86-3905111**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROMAR SPRINGS LLC  
3111 N UNIVERSITY DR  
STE 105  
CORAL SPRINGS, FL 33065 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:** ANDREA LEITE

03/17/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                                     |
|-----------------|-------------------------------------|
| Title           | MGR                                 |
| Name            | MOSHIZUKI, CLOVIS H                 |
| Address         | 5030 CHAMPION BLVD<br>G11 - BOX 144 |
| City-State-Zip: | BOCA RATON FL 33496                 |

|                 |                                     |
|-----------------|-------------------------------------|
| Title           | MGR                                 |
| Name            | SUEKO KAMIMURA, MARISA              |
| Address         | 5030 CHAMPION BLVD<br>G11 - BOX 144 |
| City-State-Zip: | BOCA RATON FL 33496                 |

|                 |                                     |
|-----------------|-------------------------------------|
| Title           | AMBR                                |
| Name            | GARDEN ISLAND INTERNATIONAL<br>CORP |
| Address         | 5030 CHAMPION BLVD<br>G11 - BOX 144 |
| City-State-Zip: | BOCA RATON FL 33496                 |

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:** MOSHIZUKI , CLOVIS H

MGR

03/17/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date