

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000463056

**Entity Name:** NOMIL LLC

**Current Principal Place of Business:**

5160 SW 40 AVE  
D22  
FORT LAUDERDALE, FL 33314

**Current Mailing Address:**

5160 SW 40 AVE  
D22  
FORT LAUDERDALE, FL 33314 US

**FEI Number:** 36-5003327

**Certificate of Status Desired:** No

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

TSABARY, SHAKED  
5160 SW 40 AVE  
D22  
FORT LAUDERDALE, FL 33314 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:** TSABARY SHAKED

02/23/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name TSABARY, SHAKED  
Address 5160 SW 40 AVE  
D22  
City-State-Zip: FORT LAUDERDALE FL 33314

*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:** SHAKED TSABARY

PRESIDENT

02/23/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date