

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000489692

Entity Name: 2239NW48ST LLC

Current Principal Place of Business:

2239 NW 48 STREET
MIAMI, FL 33142

Current Mailing Address:

PO BOX 212102
ROYAL PALM, FL 33421 US

FEI Number: 87-3637996

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JEAN BAPTISTE, LYONEL A
12230 AREACA DRIVE
WELLINGTON, FL 33414 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 CEO
Name JEAN BAPTISTE, LYONEL A
Address 12230 AREACA DRIVE
City-State-Zip: WELLINGTON FL 33414

Title VP
Name JEAN BAPTISTE, PATRICK
Address 12230 AREACA DRIVE
City-State-Zip: WELLINGTON FL 33414

Title VP
Name JEAN BAPTISTE, CHRISTOPHER
Address 12230 AREACA DRIVE
City-State-Zip: WELLINGTON FL 33414

Title VP
Name JEAN BAPTISTE, BRANDON
Address 12230 AREACA DRIVE
City-State-Zip: WELLINGTON FL 33414

Title CFO
Name SMITH, OCTAVIUS
Address 1101 ST PAUL STREET UNIT 308
City-State-Zip: BALTIMORE MD 21202

Title VP
Name JEAN BAPTISTE, LYONEL A J
Address PO BOX 212102
City-State-Zip: ROYAL PALM FL 33421

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: OCTAVIUS.E.SMITH@GMAIL.COM

TREASURER

03/07/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date