

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000105390

**Entity Name:** ALLMOMENT LLC

**Current Principal Place of Business:**

781 SW 148 AVE  
APT 1502  
DAVIE, FL 33325

**Current Mailing Address:**

781 SW 148 AVE  
APT 1502  
DAVIE, FL 33325 US

**FEI Number:** 88-1262567

**Certificate of Status Desired:** No

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

LAMADRID FINANCIAL SERVICES CORP  
1265 S PINE ISLAND RD  
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:** ALEXIS LAMADRID

03/18/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AUTHORIZED MEMBER  
Name ARTEAGA, AMY  
Address 781 SW 148 AVE  
APT 1502  
City-State-Zip: DAVIE FL 33325

Title AUTHORIZED MEMBER  
Name ACEVEDO, IGANCIO  
Address 781 SW 148 AVE  
APT 1502  
City-State-Zip: DAVIE FL 33325

*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:** AMY ROSSY ARTEAGA MANNSBACH

MRS.

03/18/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date