

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000272575

**Entity Name:** MARCELA FLORAL DESIGN LLC

**Current Principal Place of Business:**

11371 NW 32ND MNR  
SUNRISE, FL 33023

**Current Mailing Address:**

11371 NW 32ND MNR  
SUNRISE, FL 33023 US

**FEI Number: 88-3517316**

**Certificate of Status Desired:** No

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

RODRIGUEZ, CARLOS M SR.  
370 EAST 54 ST  
HIALEAH, FL 33013 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                    | Title           | MGR                 |
| Name            | RODRIGUEZ, CARLOS M MR | Name            | NINO, CLAUDIA M MRS |
| Address         | 370 EAST 54 ST         | Address         | 370 EAST 54 ST      |
| City-State-Zip: | HIALEAH FL 33013       | City-State-Zip: | HIALEAH FL 33013    |

*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:** NINO CLAUDIA M

**MANAGER**

**04/30/2024**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date