

**2024 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L22000355156

**Entity Name:** LOST PROMISES LLC

**Current Principal Place of Business:**

3904 FIELDING CT  
MILTON, FL 32571

**Current Mailing Address:**

3904 FIELDING CT  
MILTON, FL 32571 US

**FEI Number:** 88-4184859

**Certificate of Status Desired:** No

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

BASS, SAM  
3904 FIELDING CT  
MILTON, FL 32571 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:** SAM BASS

04/02/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AR  
Name BASS, SAM  
Address 3904 FIELDING CT  
City-State-Zip: MILTON FL 32571

*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:** SAM BASS

04/02/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date