2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 17, 2024
Secretary of State
0209608166CC

DOCUMENT# L22000390123

Entity Name: FLOATING RETREAT LLC

Current Principal Place of Business:

232 NE 12 AVE
APT 503
HALLANDALE BEACH, FL 33009

Current Mailing Address:

232 NE 12 AVE
APT 503
HALLANDALE BEACH, FL 33009 US

FEI Number: 92-0307445

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KARL KIEVSKIY, DENIS
232 NE 12 AVE
APT 503
HALLANDALE BEACH,, FL 33009 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: DENIS KARL KIEVSKIY 07/17/2024

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	AMBR
Name	LYASHCHENKO, VLADIMIR
Address	3131 NE 1 ST AVE, UNIT 2712
City-State-Zip:	MIAMI FL 33137

Title	AUTHORIZED MEMBER
Name	GURTOVYI, BORYS
Address	200 BISCAYNE BLVD. WAY UNIT #3110
City-State-Zip:	MIAMI FL 33131

Title	AMBR
Name	AAA STEAM & RETREAT, L.L.C
Address	900 N. FEDERAL HWY 306
City-State-Zip:	HALLANDALE BEACH FL 33009

Title	AMBR
Name	IVANOV, STANISLAV
Address	340 SOUTHEAST 3RD STREET, APT 1402
City-State-Zip:	MIAMI FL 33131

Title	AUTHORIZED MEMBER
Name	KARL KIEVSKIY, DENIS
Address	232 NE 12 AVE APT 503
City-State-Zip:	HALLANDALE BEACH FL 33009

Title	MANAGER
Name	ELIMELAKH, DAVID
Address	801 THREE ISLAND BLVD APT 517
City-State-Zip:	HALLANDALE FL 33009

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: STANISLAV IVANOV MR 07/17/2024

Electronic Signature of Signing Authorized Person(s) Detail — Date