

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000511964

**Entity Name:** SUMMIT TISSUE , LLC

**Current Principal Place of Business:**

1141 SW 84 CT  
MIAMI, FL 33144

**Current Mailing Address:**

1141 SW 84 CT  
MIAMI, FL 33144

**FEI Number:** 92-1497467

**Certificate of Status Desired:** Yes

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

SANCHEZ, KAREN  
1141 SW 84 CT  
MIAMI, FL 33144 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	AP
Name	SANCHEZ, KAREN
Address	1141 SW 84 CT
City-State-Zip:	MIAMI FL 33144

*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:** KAREN SANCHEZ

**PRESIDENT**

**01/27/2023**

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

\_\_\_\_\_  
Date