

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000286080

Entity Name: RAUL VARGAS, LLC

Current Principal Place of Business:

816 MISSOURI AVE
SAINT CLOUD, FL 34769

Current Mailing Address:

816 MISSOURI AVE
SAINT CLOUD, FL 34769 US

FEI Number: 93-1905054

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INC AUTHORITY RA
390 NORTH ORANGE AVE., STE 2300-N
ORLANDO, FL 32801 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
Name VARGAS, RAUL
Address 816 MISSOURI AVE
City-State-Zip: SAINT CLOUD FL 34769

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: RAUL VARGAS

04/14/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date