

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000436376

**Entity Name:** CO-MAE CREATIVE LLC

**Current Principal Place of Business:**

11091 NW 27 STREET  
UNIT 210  
DORAL, FL 33172

**Current Mailing Address:**

6120 NORTHWEST 116 PLACE  
413  
DORAL, FL 33178 US

**FEI Number:** 99-1499081

**Certificate of Status Desired:** No

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

ARAUJO, SKARLETT  
6120 NW 116PL  
DORAL, FL 33178 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 ARAUJO, SKARLETT P  
Address 6120 NW 116 PL  
City-State-Zip: DORAL FL 33178

*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:** ARAUJO, SKARLETT P

**MANAGER**

**02/23/2024**

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

\_\_\_\_\_  
Date