

**2025 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L23000475406

**Entity Name:** TAKEOFF ADVENTURES LLC

**Current Principal Place of Business:**

759 NW 69TH STREET  
MIAMI, FL 33150

**Current Mailing Address:**

18232 NORTHWEST 27TH AVENUE  
SUITE 209  
MIAMI, FL 33056 US

**FEI Number:** 99-0478625

**Certificate of Status Desired:** No

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

MASCOE, BRITNEY  
759 NW 69TH STREET  
MIAMI, FL 33150 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:** BRITNEY MASCOE

02/27/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            AMBR  
Name            MASCOE, BRITNEY  
Address        759 NW 69TH STREET  
City-State-Zip: MIAMI FL 33150

*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:** BRITNEY MASCOE

**OWNER**

02/27/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date