

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000489647

**Entity Name:** EMATER, LLC

**Current Principal Place of Business:**

12240 SW 53RD STREET  
SUITE 503  
COOPER CITY, FL 33330

**Current Mailing Address:**

12240 SW 53RD STREET  
SUITE 503  
COOPER CITY, FL 33330 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

LEVY, DROR  
12240 SW 53RD STREET, SUITE 503  
SUITE 503  
COOPER CITY, FL 33330 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 LEVY, DROR  
Address 12240 SW 53RD STREET, SUITE 503  
City-State-Zip: COOPER CITY FL 33330

Title MGR  
Name LEVY, LIEL  
Address 12240 SW 53RD STREET, SUITE 503  
City-State-Zip: COOPER CITY FL 33330

Title MGR  
Name GRINGLAZ, ILYA  
Address 12240 SW 53RD STREET, SUITE 503  
City-State-Zip: COOPER CITY FL 33330

Title MGR  
Name MARKOSIAN, SERGEY  
Address 12240 SW 53RD STREET, SUITE 503  
City-State-Zip: COOPER CITY FL 33330

*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:** DROR LEVY

**MGR**

**01/04/2024**

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

\_\_\_\_\_  
Date