

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000509041

**Entity Name:** PROCASHFLOW LLC

**Current Principal Place of Business:**

7520 NW 104TH AVE  
STE A103 PMB 4418  
DORAL, FL 33178

**Current Mailing Address:**

6055 NW 105TH CT  
APT # 615  
DORAL, FL 33178

**FEI Number:** 93-4397211

**Certificate of Status Desired:** No

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

GONZALEZ, HECTOR H  
6055 NW 105TH CT  
APT # 615  
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 GONZALEZ, HECTOR H  
Address 6055 NW 105TH CT APT # 615  
City-State-Zip: DORAL FL 33178

Title MGR  
Name CARABANO, HERNAN H  
Address 6425 NW 103RD PL APT 105  
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:** GONZALEZ, HECTOR

MGR

05/01/2024

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

\_\_\_\_\_  
Date