

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L24000305069

**Entity Name:** RAS PROPERTY 2, LLC

**Current Principal Place of Business:**

1880 CANOVA ST SE  
PALM BAY, FL 32908

**Current Mailing Address:**

1880 CANOVA ST SE  
PALM BAY, FL 32908 US

**FEI Number:** 33-2565479

**Certificate of Status Desired:** No

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

EASLER LAW PLLC  
508 N. HARBOR CITY BLVD.  
MELBOURNE, FL 32935 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 P  
Name SABIO, ROGER  
Address 1880 CANOVA ST SE  
City-State-Zip: PALM BAY FL 32908

Title AR  
Name SABIO, SILVIA  
Address 1880 CANOVA ST SE  
City-State-Zip: PALM BAY FL 32908

Title AR  
Name SABIO, JUAN R  
Address 1880 CANOVA ST SE  
City-State-Zip: PALM BAY FL 32908

Title AR  
Name SABIO, HELEN  
Address 1880 CANOVA ST SE  
City-State-Zip: PALM BAY FL 32908

Title AR  
Name SEDA, JESUS  
Address 1880 CANOVA ST SE  
City-State-Zip: PALM BAY FL 32908

*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:** SILVIA SABIO

**AUTHORIZED  
REPRESENTATIVE**

**05/01/2025**

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

\_\_\_\_\_  
Date