

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000452732

Entity Name: AMARTE XPRESSIONS LLC.

Current Principal Place of Business:

4497 CHAMBER CT
SPRING HILL, FL 34609

Current Mailing Address:

PO BOX 5044
SPRING HILL, FL 34611

FEI Number: 33-4861504

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

RIVERA, JESSICA A
4497 CHAMBER CT
SPRING HILL, FL 34609 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 RIVERA, JESSICA A
Address 4497 CHAMBER CT
City-State-Zip: SPRING HILL FL 34609

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: JESSICA A RIVERA

MGR

04/29/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date