

2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M15000005122

Entity Name: HEAR.COM LLC**Current Principal Place of Business:**396 ALHAMBRA CIRCLE
SUITE S-600
MIAMI, FL 33134**Current Mailing Address:**396 ALHAMBRA CIRCLE
SUITE S-600
MIAMI, FL 33134 US**FEI Number:** 47-4305088**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VCORP AGENT SERVICES, INC.
7901 4TH STREET NORTH
SUITE 300
ST.PETERSBURG, FL 33702 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:** ANTHONY PALAZZO

04/30/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGING DIRECTOR, AUTHORIZED MEMBER
Name SENDOWSKI, PATRICK
Address 396 ALHAMBRA CIRCLE
SUITE S-600
City-State-Zip: MIAMI FL 33134

Title MANAGING DIRECTOR, AUTHORIZED MEMBER
Name CRUSIUS, PAUL
Address 396 ALHAMBRA CIRCLE
SUITE S-600
City-State-Zip: MIAMI FL 33134

Title MANAGING DIRECTOR, AUTHORIZED MEMBER
Name OELLERS, HENDRIK
Address 396 ALHAMBRA CIRCLE
SUITE S-600
City-State-Zip: MIAMI FL 33134

Title MANAGING DIRECTOR, AUTHORIZED MEMBER
Name EVERTZ, ALEXANDER
Address 396 ALHAMBRA CIRCLE
HEAR.COM LLC
City-State-Zip: MIAMI FL 33134

Title AUTHORIZED MEMBER
Name KATTHAGEN , ALEXANDRA
Address 396 ALHAMBRA CIRCLE
SUITE S-600
City-State-Zip: MIAMI FL 33134

Title AUTHORIZED MEMBER
Name VIETOR, MARCO
Address 396 ALHAMBRA CIRCLE
SUITE S-600
City-State-Zip: MIAMI FL 33134

Title MANAGING DIRECTOR, AUTHORIZED MEMBER
Name DEMMERLING, TOBIAS
Address 396 ALHAMBRA CIRCLE
HEAR.COM LLC S-600
City-State-Zip: MIAMI FL 33134

Title MANAGING DIRECTOR, AUTHORIZED MEMBER
Name ALBERT, VEIT
Address 396 ALHAMBRA CIRCLE
HEAR.COM LLC
City-State-Zip: MIAMI FL 33134

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: SENDOWSKI , PATRICKMANAGING DIRECTOR,
AUTHORIZED MEMBER

04/30/2025

