

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000442533

**Entity Name:** FLIPSET LLC

**Current Principal Place of Business:**

7423 AMANDAS CROSSING DR. N  
JACKSONVILLE, FL 32244

**Current Mailing Address:**

7423 AMANDAS CROSSING DR. N  
JACKSONVILLE, FL 32244 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

CORONA, ADRIAN  
7423 AMANDAS CROSSING DR. N  
JACKSONVILLE, FL 32244 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 CORONA, ADRIAN

Address 4200 NW 3RD CT, APT. 221

City-State-Zip: FORT LAUDERDALE FL 33317

*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:** ADRIAN CORONA

MGR

08/31/2023

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

\_\_\_\_\_  
Date