

**2021 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A13000000517

**Entity Name:** RUBUJO FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP

**FILED**  
**Jan 11, 2021**  
**Secretary of State**  
**4906968809CC**

**Current Principal Place of Business:**

2645 EXECUTIVE PARK DRIVE  
SUITE 123-A  
WESTON, FL 33331

**Current Mailing Address:**

2645 EXECUTIVE PARK DRIVE  
SUITE 123-A  
WESTON, FL 33331 US

**FEI Number: 46-4446242**

**Certificate of Status Desired: No**

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

RUBERT, SAMUEL  
SAMUEL A. RUBERT, P.A.  
2645 EXECUTIVE PARK DRIVE SUITE 123-A  
WESTON, FL 33331 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

**General Partner Detail :**

Document #		Document #	
Name	RUBERT, SAMUEL TRUSTEE	Name	LUJO, ATHALIA TRUSTEE
Address	2645 EXECUTIVE PARK DRIVE SUITE 123-A	Address	2645 EXECUTIVE PARK DRIVE SUITE 123-A
City-State-Zip:	WESTON FL 33331	City-State-Zip:	WESTON FL 33331

*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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: SAMUEL A. RUBERT**

**GP**

**01/11/2021**

\_\_\_\_\_  
Electronic Signature of Signing General Partner Detail

\_\_\_\_\_  
Date