

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000040744

Entity Name: SHRIJIBAPA, L.L.C.**Current Principal Place of Business:**2560 STATE ROAD 16
ST AUGUSTINE, FL 32092**Current Mailing Address:**2560 STATE ROAD 16
ST AUGUSTINE, FL 32092**FEI Number:** 20-0330522**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PATEL, VIJAY
2560 STATE ROAD 16
ST. AUGUSTINE, FL 32092 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	MGRM
Name	PATEL, VIJAY
Address	921 SOUTH FOREST CREEK DR
City-State-Zip:	ST. AUGUSTINE FL 32092

Title	MGR
Name	PATEL, MITA
Address	921 SOUTH FOREST CREEK DR
City-State-Zip:	ST. AUGUSTINE FL 32097

Title	MGR
Name	PATEL, BHARTI
Address	3 SANTA LUCIA CT
City-State-Zip:	SADDLE BROOK NJ 07663

Title	MGR
Name	PATEL, DHARMENDRA
Address	638 WOODMAN DRIVE
City-State-Zip:	CONWAY SC 29526

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: VIJAY PATEL**MANAGING MEMBER****03/25/2022**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date