

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000033479

Entity Name: FOUR AMIGOS, LLC**Current Principal Place of Business:**11478 PINE STREET
JACKSONVILLE, FL 32258**Current Mailing Address:**140 WEST 9TH STREET
JACKSONVILLE, FL 32206 US**FEI Number:** 20-1124816**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCLUKE BUSINESS SERVICES INC
140 WEST 9TH ST
JACKSONVILLE, FL 32206 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:** SHARON A MCCASKEY

03/28/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AUTHORIZED MEMBER
Name DUDLEY, JOHNNY L
Address 11478 PINE STREET
City-State-Zip: JACKSONVILLE FL 32258

Title AUTHORIZED MEMBER
Name GULFSTREAM DEVELOPMENT LLC
Address 249 SPARROW BRANCH CIRCLE
City-State-Zip: SAINT JOHNS FL 32259

Title AUTHORIZED MEMBER
Name MURPHY, CLINT
Address 11555 CENTRAL PARKWAY, SUITE 1102
City-State-Zip: JACKSONVILLE FL 32224

Title AUTHORIZED MEMBER
Name ERGISI, MURAT
Address 8837 GOODBY'S EXECUTIVE DR. SUITE 1
City-State-Zip: JACKSONVILLE FL 32217

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: JOHNNY L DUDLEY

AMBR

03/28/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date