

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000033479

**Entity Name:** FOUR AMIGOS, LLC

**Current Principal Place of Business:**

11476 PINE STREET  
JACKSONVILLE, FL 32258

**Current Mailing Address:**

P. O. BOX 56644  
JACKSONVILLE, FL 32241

**FEI Number:** 20-1124816

**Certificate of Status Desired:** No

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

DUDLEY, DANIEL P  
11476 PINE ST.  
JACKSONVILLE, FL 32258 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 DUDLEY, JOHNNY L  
Address 11478 PINE STREET  
City-State-Zip: JACKSONVILLE FL 32258

Title MGRM  
Name DUDLEY, DANIEL P  
Address 11476 PINE STREET  
City-State-Zip: JACKSONVILLE FL 32258

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

Title MGRM  
Name MCKELLER, ROBERT  
Address 7633 RICKER ROAD  
City-State-Zip: JACKSONVILLE FL 32244

*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:** CLINT MURPHY

MGRM

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date