## 2013 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

**FILED** Apr 19, 2013

**Secretary of State** 

CC8026815458

Authorized Person(s) Detail:

Title MGRM

Title **MGRM** 

DUDLEY, JOHNNY L Name DUDLEY, DANIEL P Name 11478 PINE STREET Address 11476 PINE STREET Address

City-State-Zip: JACKSONVILLE FL 32258 JACKSONVILLE FL 32258 City-State-Zip:

Title **MGRM** Title **MGRM** 

Name MCKELLER, ROBERT MURPHY, CLINT Name Address 7633 RICKER ROAD Address 11555 CENTRAL PARKWAY, SUITE

1102

JACKSONVILLE FL 32224 City-State-Zip:

JACKSONVILLE FL 32244 City-State-Zip:

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CLINT MURPHY **MGRM** Electronic Signature of Signing Authorized Person(s) Detail

04/19/2013

Date