

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000068398

**Entity Name:** SHAMROCK RIDE LLC

**Current Principal Place of Business:**

2040 NORTHEAST 154 ST.  
NORTH MIAMI BEACH, FL 33162

**Current Mailing Address:**

2040 NORTHEAST 154 ST.  
NORTH MIAMI BEACH, FL 33162

**FEI Number:** 16-1775289

**Certificate of Status Desired:** No

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

MCPHERSON, KATHY  
7400 NORTH OAKMONT DR.  
MIAMI, FL 33015 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 MGR  
Name MCPHERSON, KATHY  
Address 7400 N. OAKMONT DR.  
City-State-Zip: MIAMI FL 33015

*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:** KATHY MCPHERSON

**OPERATIONS MANAGER** 01/15/2020

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date