# 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000059900

Entity Name: BLACK OPS LLC

#### Current Principal Place of Business:

7815 WEST 4TH AVENUE HIALEAH, FL 33014

## **Current Mailing Address:**

7815 WEST 4TH AVENUE HIALEAH, FL 33014 US

# FEI Number: 27-0412734

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

RICCOBONO, ROBERT J 7815 WEST 4TH AVENUE HIALEAH, FL 33014 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                     | E: ROBERT RICCOBONO                      |                 |                      | 04/09/2018 |
|-------------------------------|--|-----------------|----------------------|------------|
|                               | Electronic Signature of Registered Agent |                 |                      | Date       |
| Authorized Person(s) Detail : |  |                 |                      |            |
| Title                         | MGMR                                     | Title           | AUTHORIZED MEMBER    |            |
| Name                          | GARCIA, CARL J                           | Name            | RICCOBONO, ROBERT    |            |
| Address                       | 7815 WEST 4TH AVENUE                     | Address         | 7815 WEST 4TH AVENUE |            |
| City-State-Zip:               | HIALEAH FL 33014                         | City-State-Zip: | HIALEAH FL 33014     |            |
| Title                         | AUTHORIZED MEMBER                        |                 |                      |            |
| Name                          | GARCIA, LOUIS J                          |                 |                      |            |
| Address                       | 7815 WEST 4TH AVENUE                     |                 |                      |            |
| City-State-Zip:               | HIALEAH FL 33014                         |                 |                      |            |

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: ROBERT RICCOBONO

PARTNER

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 09, 2018 Secretary of State CC1003370632

Certificate of Status Desired: No