## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000028712

Entity Name: CAVES BRANCH OUTPOST LLC

**Current Principal Place of Business:** 

2000 PONCE DE LEON BLVD SUITE 600 CORAL GABLES, FL 33134

## **Current Mailing Address:**

2000 PONCE DE LEON BLVD SUITE 600 CORAL GABLES, FL 33134 US

FEI Number: 27-2125508 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

GEGG, DAVID 2000 PONCE DE LEON BLVD SUITE 600 CORAL GABLES, FL 33134 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: DAVID GEGG 04/29/2024

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

City-State-Zip:

Title MGRM Title MGRM

Name GEGG, DAVID Name GEGG, DEBORAH

Address 2000 PONCE DE LEON BLVD SUITE Address 2000 PONCE DE LEON BLVD SUITE

CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

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.

FILED Apr 29, 2024

**Secretary of State** 

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