

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000022496

Entity Name: BOUCHER BROTHERS WEST COAST, LLC

Current Principal Place of Business:

1451 OCEAN DRIVE, SUITE 205
MIAMI BEACH, FL 33139

Current Mailing Address:

1451 OCEAN DRIVE, SUITE 205
MIAMI BEACH, FL 33139

FEI Number: 90-0795258

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WATTS-FITZGERALD, ABIGAIL C
C/O DEVINE GOODMAN RASCO & WATTS-FITZGERALD LLP
2800 PONCE DE LEON BLVD. SUITE 1400
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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title: MANAGER
Name: BOUCHER, JAMES R
Address: 1451 OCEAN DR
SUITE 205
City-State-Zip: MIAMI BEACH FL 33139

Title: MANAGING MEMBER
Name: BOUCHER, MICHAEL G
Address: 1451 OCEAN DR
SUITE 205
City-State-Zip: MIAMI BEACH FL 33139

Title: MANAGING MEMBER
Name: BOUCHER, STEVEN V
Address: 1451 OCEAN DRIVE
SUITE 205
City-State-Zip: MIAMI BEACH FL 33139

Title: MANAGING MEMBER
Name: BOUCHER, PERRY A
Address: 1451 OCEAN DR
SUITE 205
City-State-Zip: MIAMI BEACH FL 33139

Title: MANAGING MEMBER
Name: DOMINGUEZ, JOHN P
Address: 1451 OCEAN DR
SUITE 205
City-State-Zip: MIAMI BEACH FL 33139

Title: CFO
Name: CEDRATI, ADAM
Address: 1451 OCEAN DRIVE, SUITE 205
City-State-Zip: MIAMI BEACH FL 33139

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: ADAM CEDRATI

CFO

04/23/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date