

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000029003

**Entity Name:** KEMBALL, LLC.

**Current Principal Place of Business:**

100 N. BISCAYNE BLVD.  
C/O RICH HOMES OF FLORIDA, INC. SUITE 3050  
MIAMI, FL 33132

**Current Mailing Address:**

100 N. BISCAYNE BLVD.  
C/O RICH HOMES OF FLORIDA, INC. SUITE 3050  
MIAMI, FL 33132 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

FREDERIC BARTHE PA  
17 SE 24TH AVE  
2ND FLOOR  
POMPANO BEACH, FL 33062 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	MGRM
Name	KEMBALL, ALEXANDER
Address	100 N. BISCAYNE BLVD C/O RICH HOMES OF FLORIDA, INC. SUITE 3050
City-State-Zip:	MIAMI FL 33132

Title	MGRM
Name	KEMBALL, MURIEL
Address	100 N. BISCAYNE BLVD C/O RICH HOMES OF FLORIDA, INC. SUITE 3050
City-State-Zip:	MIAMI FL 33132

*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:** ALEXANDER KEMBALL

**MR.**

**02/13/2020**

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

\_\_\_\_\_  
Date