

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000191489

**Entity Name:** BL BROTHERS LLC

**Current Principal Place of Business:**

705 TRIANA STREET  
WEST PALM BEACH, FL 33413

**Current Mailing Address:**

705 TRIANA STREET  
WEST PALM BEACH, FL 33413 US

**FEI Number:** 47-2568388

**Certificate of Status Desired:** No

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

RUIZ, NATALIA  
8401 LAKE WORTH ROAD  
SUITE 225  
LAKE WORTH, FL 33467 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 BOLIVAR, OSCAR E  
Address 705 TRIANA STREET  
City-State-Zip: WEST PALM BEACH FL 33413

Title MGR  
Name BOLIVAR, JAIME A  
Address 705 TRIANA STREET  
City-State-Zip: WEST PALM BEACH FL 33413

Title MGR  
Name BOLIVAR, SANDRA P  
Address 705 TRIANA STREET  
City-State-Zip: WEST PALM BEACH FL 33413

Title MGR  
Name BOLIVAR, JUAN C  
Address 705 TRIANA STREET  
City-State-Zip: WEST PALM BEACH FL 33413

*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:** OSCAR E BOLIVAR

MGR

04/20/2022

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

\_\_\_\_\_  
Date