

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000128221

**Entity Name:** BON GRILLE LATIN GRILL & MEAT MARKET LLC

**FILED**  
**Apr 30, 2016**  
**Secretary of State**  
**CC8312451261**

**Current Principal Place of Business:**

12700 SW 122ND AVENUE  
STE 101,102 & 103  
MIAMI, FL 33186

**Current Mailing Address:**

12700 SW 122ND AVENUE  
STE 101,102 & 103  
MIAMI, FL 33186 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

DA SILVA, GUILHERME  
13670 SW 141ST STREET  
MIAMI, FL 33186 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           | AMBR                                       | Title           | AMBR                                       |
| Name            | DA SILVA, GUILHERME                        | Name            | DA SILVA, ROBSON                           |
| Address         | 12700 SW 122ND AVENUE<br>STE 101,102 & 103 | Address         | 12700 SW 122ND AVENUE<br>STE 101,102 & 103 |
| City-State-Zip: | MIAMI FL 33186                             | City-State-Zip: | MIAMI FL 33186                             |

  

|                 |   |
|-----------------|---|
| Title           | AMBR  |
| Name            | O ESPETAO DE ITATIBA LTDA ME                  |
| Address         | AVENIDA 29 DE ABRIL, 35 - BOXES<br>41,43,E 46 |
| City-State-Zip: | CENTRO 13256-900                              |

*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: GUILHERME DA SILVA**

**AMBR**

**04/30/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date