2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000171714

Entity Name: BCSL HOLDINGS, LLC

Current Principal Place of Business:

MIAMI. FL 33162

17525 NE 9TH AVE

Current Mailing Address:

17525 NE 9TH AVE MIAMI, FL 33162 US

FEI Number: 47-5304259 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOSTCHIN, BURL 17525 NE 9TH AVE MIAMI, FL 33162 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.

T:41 -

MODM

SIGNATURE:

Title

Electronic Signature of Registered Agent

Date

FILED Jun 25, 2020

Secretary of State

2332029967CC

Authorized Person(s) Detail : ^ **MDD**

Title	AIVIDR	Tille	IVIGRIVI
Name	SOSTCHIN, LEAH	Name	SOSTCHIN, CHAYA
Address	17525 NE 9TH AVE	Address	17525 NE 9TH AVE
City-State-Zip:	MIAMI FL 33162	City-State-Zip:	MIAMI FL 33162

MGRM Title Title **AMBR**

Name SOSTCHIN, BURL SOSTCHIN, YOSEF Name Address 17525 NE 9TH AVE Address 17525 NE 9TH AVE MIAMI FL 33162 City-State-Zip: MIAMI FL 33162 City-State-Zip:

Title **AMBR** Title **AMBR**

Name SOSTCHIN, GITTEL SOSTCHIN, YAKOV Name Address 17525 NE 9TH AVE 17525 NE 9TH AVE Address City-State-Zip: MIAMI FL 33162 MIAMI FL 33162 City-State-Zip:

Title AUTHORIZED MEMBER Title **AUTHORIZED MEMBER** Name SOSTCHIN, FAYGA SOSTCHIN, GERSHON Name 17525 NE 9TH AVE Address 17525 NE 9TH AVE Address City-State-Zip: MIAMI FL 33162 City-State-Zip: MIAMI FL 33162

Continues on page 2

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.

06/25/2020 SIGNATURE: BURL SOSTCHIN **MGRM**

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued:

TitleAUTHORIZED MEMBERTitleAUTHORIZED MEMBERNameSOSTCHIN, RACHEL BNameSOSTCHIN, ASHER GAddress17525 NE 9TH AVEAddress17525 NE 9TH AVECity-State-Zip:MIAMI FL 33162City-State-Zip:MIAMI FL 33162