

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000067235

Entity Name: 2124 GARFIELD, LLC

Current Principal Place of Business:

17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470

Current Mailing Address:

P.O. BOX 10472
MIAMI, FL 33101 US

FEI Number: 82-0960809

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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 SHUB, SENDER
Address PO BOX 2399
City-State-Zip: TOA BAJA OC 00951

Title MGR
Name KOCHEN, BRANDON
Address P O BOX 10472
City-State-Zip: MIAMI FL 33101

Title MGR
Name DAGAN, YONATAN
Address P.O. BOX 814894
City-State-Zip: HOLLYWOOD FL 33081

Title MGR
Name REINER, EDDIE
Address 55 S.E. 6TH ST. APT 3005
City-State-Zip: MIAMI FL 33131

Title MGR
Name SHUB, MARK
Address PO BOX 10472
City-State-Zip: MIAMI FL 33101

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: SENDER SHUB

MANAGER

01/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date