

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000133796

**Entity Name:** OVIEDO BURGERS, LLC

**Current Principal Place of Business:**

889 W MITCHELL HAMMOCK RD  
OVIEDO, FL 32765

**Current Mailing Address:**

889 W MITCHELL HAMMOCK RD  
OVIEDO, FL 32765 US

**FEI Number:** 82-1943188

**Certificate of Status Desired:** No

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

BRICK, STEVE  
889 W MITCHELL HAMMOCK RD  
OVIEDO, FL 32765 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:** STEVE BRICK

01/31/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	OWNER	Title	OWNER
Name	BOWE, GALEN	Name	BOWE, JEREMIAH
Address	6756 COUNTY HWY BC	Address	S15465 WILLIAMS RD
City-State-Zip:	SPARTA WI 54656	City-State-Zip:	STRUM WI 54770
Title	OWNER		
Name	BRICK, STEVE		
Address	889 W MITCHELL HAMMOCK RD		
City-State-Zip:	OVIEDO FL 32765		

*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:** JEREMIAH BOWE

OWNER

01/31/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date