# 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.

AMBR

### SIGNATURE: ERIC BYRD

Electronic Signature of Signing Authorized Person(s) Detail

# 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

# DOCUMENT# L17000141144

## Entity Name: BYRD'S RESTAURANT EQUIPMENT & EVENT RENTALS, LLC

#### **Current Principal Place of Business:**

3800 FOWLER STREET UNIT #11 FORT MYERS, FLORIDA, FL 33901

#### **Current Mailing Address:**

3800 FOWLER STREET UNIT #11 FORT MYERS, FLORIDA, FL 33901 US

#### FEI Number: 82-2047949

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

BYRD, ERIC 3800 FOWLER STREET UNIT #11 FORT MYERS, FL 33901 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

#### Authorized Person(s) Detail :

Title	AMBR
Name	BYRD, ERIC
Address	5325 ELKHORN BLVD, 231
City-State-Zip:	SACRAMENTO CA 95842

Date

# FILED Mar 19, 2018 Secretary of State CC2524338138

Certificate of Status Desired: No

03/19/2018 Date