

**2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L17000169749

**Entity Name:** 904 CATERING LLC

**Current Principal Place of Business:**

2771 MONUMENT RD  
SUITE 138  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

2771 MONUMENT RD  
SUITE 138  
JACKSONVILLE, FL 32225

**FEI Number:** 82-3417489

**Certificate of Status Desired:** Yes

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

HAWKINS, DAVID OWNER  
2771 MONUMENT RD  
SUITE 138  
JACKSONVILLE, FL 32225 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:** DAVID HAWKINS

10/15/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AR  
Name HAWKINS, DAVID  
Address 2771 MONUMENT RD  
SUITE 138  
City-State-Zip: JACKSONVILLE FL 32225

Title MGR  
Name HAWKINS, LAURIE  
Address 2771 MONUMENT RD  
SUITE 138  
City-State-Zip: JACKSONVILLE FL 32225

Title AMBR  
Name HAWKINS, MALIK  
Address 2771 MONUMENT RD  
SUITE 138  
City-State-Zip: JACKSONVILLE FL 32225

Title ABMR  
Name DAVIS, AARON  
Address 2771 MONUMENT RD  
SUITE 138  
City-State-Zip: JACKSONVILLE FL 32225

*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:** DAVID HAWKINS

OWNER

10/15/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date