## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000054440

Entity Name: ATLAS RESTORANT GROUP 2, LLC

**Current Principal Place of Business:** 

1080 NE 24 AVE APT 1 POMPANO BEACH, FL 33062

**Current Mailing Address:** 

1080 NE 24 AVE

1

POMPANO BEACH, FL 33062 US

FEI Number: APPLIED FOR Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARBEN MUCOLLARI 1080 NE 25 AVE APT 1 POMPANO BEACH, FL 33062 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: ARBEN MUCOLLARI 04/05/2019

Electronic Signature of Registered Agent

## Authorized Person(s) Detail:

Title MGR

Name MUCOLLARI, ARBEN SR.

Address 1080 NE 24TH AVE., APT. 1

City-State-Zip: POMPANO BEACH FL 33062

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: ARBEN MUCOLLARI

Electronic Signature of Signing Authorized Person(s) Detail

PRESIDENT

04/05/2019

FILED Apr 05, 2019

**Secretary of State** 

2537801074CC

Date