

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000195720

**Entity Name:** MIND RAMEN LLC

**Current Principal Place of Business:**

4219 PLACID DR  
SARASOTA, FL 34243

**Current Mailing Address:**

4219 PLACID DR  
SARASOTA, FL 34243 US

**FEI Number:** 83-1758779

**Certificate of Status Desired:** No

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

RIVINIUS, MARK  
MIND RAMEN GAMES  
4219 PLACID D R  
SARASOTA, FL 34243 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 AMBR  
Name BATTAGLIA, MARIO  
Address 4219 PLACID DR.  
City-State-Zip: SARASOTA FL 34243

Title AMBR  
Name RIVINIUS, MARK  
Address 6120 MEDICI CT APT 103  
City-State-Zip: SARASOTA FL 34243

Title AMBR  
Name KRENTZ, PETER  
Address 5009 20TH ST W  
City-State-Zip: BRADENTON FL 34207

*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:** MARK RIVINIUS

**OWNER**

**04/10/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date