

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000258735

Entity Name: BEN SHELL LLC**Current Principal Place of Business:**501 NW 93RD AVENUE
PEMBROKE PINES, FL 33024**Current Mailing Address:**501 NW 93RD AVENUE
PEMBROKE PINES, FL 33024 US**FEI Number:** 83-4489865**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**RODRIGUES, SHELAWN
501 NW 93RD AVENUE
PEMBROKE PINES, FL 33024 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 MANAGER
Name BERNARD, ADAM
Address 501 NW 93RD AVENUE
City-State-Zip: PEMBROKE PINES FL 33024

Title MANAGER
Name RODRIGUES, BENEDICTINE
Address 501 NW 93RD AVENUE
City-State-Zip: PEMBROKE PINES FL 33024

Title MANAGER
Name BERNARD, BENJAMIN DAVID
Address 501 NW 93RD AVENUE
City-State-Zip: PEMBROKE PINES FL 33024

Title MANAGER
Name RODRIGUES, SHELAWN SHARON
Address 501 NW 93RD AVENUE
City-State-Zip: PEMBROKE PINES FL 33024

Title MANAGER
Name BERNARD, JONATHAN A
Address 501 NW 93RD AVENUE
City-State-Zip: PEMBROKE PINES FL 33024

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: BENEDICTINE RODRIGUES

MANAGER

01/06/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date