

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000065092

**Entity Name:** GUADALUPE ROASTERY, LLC**Current Principal Place of Business:**170 AIRPARK BLVD.  
103  
IMMOKALEE, FL 34142**Current Mailing Address:**170 AIRPARK BLVD.  
103  
IMMOKALEE, FL 34142**FEI Number:** 83-4043869**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FASSBENDER, BRAD  
9681 GLADIOLUS DRIVE  
UNIT 111  
FORT MYERS, FL 33908 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:** BRAD FASSBENDER

06/23/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name BLACK-STRIPE ADVISORS, LLC  
Address 125 HILLVUE LANE  
City-State-Zip: PITTSBURGH PA 15237

Title D  
Name FASSBENDER, BRAD  
Address 2050 COMMERCE AVE UNIT 3  
IMMOKALEE  
City-State-Zip: IMMOKALEE FL 34142

Title D  
Name PINTER, THOMAS  
Address 2050 COMMERCE AVE UNIT 3  
IMMOKALEE  
City-State-Zip: IMMOKALEE FL 34142

Title D  
Name NUSSBAUM, ANDREW  
Address 140 SEAVIEW CT. UNIT 1802N  
City-State-Zip: MARCO ISLAND FL 34145

Title D  
Name PINTO, MICHAEL  
Address 5050 AVE MARIA BLVD.  
City-State-Zip: AVE MARIA FL 34142

Title D  
Name BABINEAU, JONATHAN  
Address 2050 COMMERCE AVE UNIT 3  
IMMOKALEE  
City-State-Zip: IMMOKALEE FL 34142

*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:** BRAD FASSBENDER**DIRECTOR**

06/23/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date