

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000182156

**Entity Name:** AJI CASSELBERRY LLC

**Current Principal Place of Business:**

1436 STATE RD 436  
SITE 1024  
CASSELBERRY, FL 32707

**Current Mailing Address:**

1436 STATE RD 436  
SITE 1024  
CASSELBERRY, FL 32707

**FEI Number:** 84-2385119

**Certificate of Status Desired:** No

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

ROJAS, HAROLD  
1436 STATE RD 436  
SUITE 1024  
CASSELBERRY, FL 32707 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            MBR  
Name            AJI GOURMET, LLC  
Address        11236 S OBT  
City-State-Zip: ORLANDO FL 32837

Title            MBR  
Name            HR&C CAPITAL GROUP, LLC  
Address        6392 MIRAMONTE DRIVE APT 102  
City-State-Zip: ORLANDO FL 32835

*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:** HAROLD ROJAS

**MGR**

**01/20/2023**

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

\_\_\_\_\_  
Date