| 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 other 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 other 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 other 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 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 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 the information indicated in the information is the same legal effect as if made under the information indicated in the information is the same legal effect as if made under the information is the information indicated in the same legal effect as if made under the information is the information in the information is the information is the information in the information is the informat | | |
|--|-----------|------------|
| 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: ELIAS SANCHEZ | PRESIDENT | 09/13/2021 |

PRESIDENT

Electronic Signature of Signing Authorized Person(s) Detail

5745 BENEY RD. JACKSONVILLE, FL 32207

Entity Name: EL BOTANERO CANTINA LLC

Current Principal Place of Business:

Current Mailing Address:

DOCUMENT# L19000189701

8648 STAR LEAF RD NORTH JACKSONVILLE, FL 32210 US

FEI Number: 84-2491854

Name and Address of Current Registered Agent:

ACCOUNTING AT ALL COST, INC 3115 SPRING GLEN RD 504 JACKSONVILLE, FL 32207 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: FUADA VELIC

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

PRESIDENT Title Name SANCHEZ , ELIAS Address 5745 BENEY RD. City-State-Zip: JACKSONVILLE FL 32207

Certificate of Status Desired: No

09/13/2021 Date

FILED Sep 13, 2021 Secretary of State 2805616706CC

Date