

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000280200

Entity Name: CHOPTOUT, LLC

Current Principal Place of Business:

502 S FREMONT AVE
APT 216
TAMPA, FL 33606

Current Mailing Address:

502 S FREMONT AVE
APT 216
TAMPA, FL 33606

FEI Number: 84-3490423

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HAVRE, BILL
7901 4TH ST N
STE 300
ST.PETERSBURG, FL 33702 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 PRESIDENT
Name ALCARAZ, GAELLE M
Address 502 S FREMONT AVE, APT 216
City-State-Zip: TAMPA FL 33606

Title VP
Name ALCARAZ, ARNAUD
Address 502 S FREMONT AVE, APT 216
City-State-Zip: TAMPA FL 33606

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: GAELLE M ALCARAZ

PRESIDENT

03/27/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date