

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000373548

**Entity Name:** MY ROCK IL LLC

**Current Principal Place of Business:**

2781 TWIN OAKS WAY  
WELLINGTON, FL 33414

**Current Mailing Address:**

15775 89TH AVENUE NORTH  
PALM BEACH GARDENS, FL 33418 US

**FEI Number:** 86-1186289

**Certificate of Status Desired:** No

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

BRENNER, STEPHEN L  
15775 89TH AVENUE NORTH  
PALM BEACH GARDENS, FL 33418 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 MGR  
Name BRENNER, STEPHEN L  
Address 15775 89TH AVENUE NORTH  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title MGR  
Name SCHREIBER, SYDNEY  
Address 2781 TWIN OAKS WAY,  
City-State-Zip: WELLINGTON FL 33414

Title MANAGER  
Name HIROSH, SAHAR DANIEL  
Address 2781 TWIN OAKS WAY  
City-State-Zip: WELLINGTON FL 33414

*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:** STEPHEN L. BRENNER

MANAGER

02/14/2021

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

\_\_\_\_\_  
Date