### 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L20000378887

Entity Name: BAT CUTS SANFORD LLC

### **Current Principal Place of Business:**

135 MIDDLE STREET **SUITE 1021** LAKE MARY, FL 32746

## **Current Mailing Address:**

**135 MIDDLE STREET SUITE 1021** LAKE MARY, FL 32746 US

## FEI Number: 85-4277435

### Name and Address of Current Registered Agent:

ANTONIK, TROY M 135 MIDDLE STREET **SUITE 1021** LAKE MARY, FL 32746 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

# Authorized Person(s) Detail -

City-State-Zip: LAKE MARY FL 32746

Person(s) Detail :		
MANAGER	Title	MANAGER
BITTNER, ADRIAN	Name	ANTONIK, TROY
135 MIDDLE STREET SUITE 1021	Address	135 MIDDLE STREET SUITE 1021
LAKE MARY FL 32746	City-State-Zip:	LAKE MARY FL 32746
MANAGER		
BAT CUTS LLC		
135 MIDDLE STREET SUITE 1021		
	MANAGER BITTNER, ADRIAN 135 MIDDLE STREET SUITE 1021 LAKE MARY FL 32746 MANAGER BAT CUTS LLC 135 MIDDLE STREET	MANAGERTitleBITTNER, ADRIANName135 MIDDLE STREETAddressSUITE 1021LAKE MARY FL 32746LAKE MARY FL 32746City-State-Zip:MANAGERBAT CUTS LLC135 MIDDLE STREETJast Street

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: ADRIAN BITTNER

**CO-MANAGER** 

04/26/2022

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date

Date