## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000013726

Entity Name: BF TAMPA - CHANNELSIDE, LLC

FILED
Apr 24, 2022
Secretary of State
2672621135CC

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

200 WEST CYPRESS CREEK RD, SUITE 220

FT. LAUDERDALE, FL 33309

## **Current Mailing Address:**

200 WEST CYPRESS CREEK RD, SUITE 220 FT. LAUDERDALE. FL 33309 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC 801 US HWY 1 NORTH PALM BEACH, FL 33408 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: KAYLA BLACKWELL, SPECIAL SECRETARY 04/24/2022

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGR Title AUTHORIZED REPRESENTATIVE

Name BURGERFI INTERNATIONAL, LLC Name BAINES, IAN

Address 200 WEST CYPRESS CREEK RD, Address 200 WEST CYPRESS CREEK RD,

SUITE 220 SUITE 220

City-State-Zip: FT. LAUDERDALE FL 33309 City-State-Zip: FT. LAUDERDALE FL 33309

Title AUTHORIZED REPRESENTATIVE Title AUTHORIZED REPRESENTATIVE

Name RENNA, PATRICK Name SCHNOPP, STEFAN

Address 200 WEST CYPRESS CREEK RD, Address 200 WEST CYPRESS CREEK RD,

SUITE 220 SUITE 220

City-State-Zip: FT. LAUDERDALE FL 33309 City-State-Zip: FT. LAUDERDALE FL 33309

Title AUTHORIZED REPRESENTATIVE Title AUTHORIZED REPRESENTATIVE

Name RABINOVITCH, MICHAEL Name ZAVOLTA, MICHELLE

Address 200 WEST CYPRESS CREEK RD, Address 200 WEST CYPRESS CREEK RD,

SUITE 220 SUITE 220

City-State-Zip: FT. LAUDERDALE FL 33309 City-State-Zip: FT. LAUDERDALE FL 33309

Title AUTHORIZED REPRESENTATIVE

Name BISKIN, RON

Address 200 WEST CYPRESS CREEK RD,

SUITE 220

City-State-Zip: FT. LAUDERDALE FL 33309

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: IAN BAINES AUTHORIZED 04/24/2022

REPRESENTATIVE, BY KAYLA BLACKWELL, ATTORNEY-IN-FACT