

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000111277

**Entity Name:** LINER DA BARBER, LLC

**Current Principal Place of Business:**

5149 NW 6CT  
DELRAY BEACH, FL 33445

**Current Mailing Address:**

5149 NW 6CT  
DELRAY BEACH, FL 33445

**FEI Number:** 86-2470581

**Certificate of Status Desired:** Yes

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

PIERRE, LINER  
5149 NW 6TH COURT  
DELRAY BEACH, FL 33445 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:** LINER PIERRE

02/21/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name PIERRE, LINER  
Address 5149 NW 6CT  
City-State-Zip: DELRAY BEACH FL 33445

*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:** PIERRE, LINER

MANAGER

02/21/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date