

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000332942

**Entity Name:** TRIPLE C'S RAW BULLIES LLC

**Current Principal Place of Business:**

161 SW 5TH COURT  
2  
DEERFIELD BEACH, FL 33441

**Current Mailing Address:**

4050 NE 2ND AVE.  
DEERFIELD BEACH, FL 33064 US

**FEI Number:** 88-3646398

**Certificate of Status Desired:** No

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

LEWIS, SABRINA  
161 SW 5TH CT.  
APT 2  
DEERFIELD BEACH, FL 33441 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            AMBR  
Name            JOSEPH, FRANCISK  
Address        4050 NE 2ND AVE  
City-State-Zip: DEERFIELD BEACH FL 33064

Title            MGR  
Name            LEWIS, SABRINA  
Address        161 SW 5TH CT.  
                  APT 2  
City-State-Zip: DEERFIELD BEACH FL 33441

*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:** SABRINA M LEWIS

**MANGER**

**04/30/2024**

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

\_\_\_\_\_  
Date