# SIGNATURE: MICHAEL SWERDLOW

that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Authorized Person(s) Detail

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M0000002598

Entity Name: BONEFISH PARTNERS, LLC

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

2901 FLORIDA AVENUE SUITE 806 MIAMI, FL 33133

#### **Current Mailing Address:**

2901 FLORIDA AVENUE SUITE 806 MIAMI, FL 33133 US

### FEI Number: 51-0401107

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

DILL, BRETT 2901 FLORIDA AVENUE SUITE 806 MIAMI, FL 33133 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 :

| Title           | MGRM                          | Title           | MGRM                          |
|-----------------|-------------------------------|-----------------|-------------------------------|
| Name            | SWERDLOW, MICHAEL             | Name            | DILL, BRETT                   |
| Address         | 2901 FLORIDA AVENUE SUITE 806 | Address         | 2901 FLORIDA AVENUE SUITE 806 |
| City-State-Zip: | COCONUT GROVE FL 33133        | City-State-Zip: | COCONUT GROVE FL 33133        |
|                 |                               |                 |                               |
|                 |                               |                 |                               |
| Title           | MGRM                          | Title           | MGRM                          |
| Title<br>Name   | MGRM<br>SWERDLOW, RICHARD     | Title<br>Name   | MGRM<br>BF INVESTORS, LLC     |
|                 |                               |                 |                               |
| Name            | SWERDLOW, RICHARD             | Name            | BF INVESTORS, LLC             |

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

PRESIDENT 03/19/2021

FILED Mar 19, 2021 Secretary of State 6279674489CC

Certificate of Status Desired: Yes

Date

Date