2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000007758

Entity Name: SQUARE SCOOPS COFFEE & CREAMERY, LLC

FILED Apr 26, 2021 Secretary of State 9643798911CC

Current Principal Place of Business:

4500 PGA BOULEVARD

SUITE 400

PALM BEACH GARDENS, FL 33418

Current Mailing Address:

4500 PGA BOULEVARD SUITE 400

PALM BEACH GARDENS, FL 33418 US

FEI Number: 81-3986262 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPEER, GEORGE G. 4500 PGA BOULEVARD SUITE 400

Title

PALM BEACH GARDENS, FL 33418 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: GEORGE G. SPEER 04/26/2021

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

SECRETARY

Title **MEMBER** Title PRESIDENT, CEO Name BABCOCK RANCH TOWN Name KITSON, SYDNEY W OPERATIONS, LLC

4500 PGA BOULEVARD Address 4500 PGA BOULEVARD Address

SUITE 400 SUITE 400

City-State-Zip: PALM BEACH GARDENS FL 33418 City-State-Zip: PALM BEACH GARDENS FL 33418

Title VΡ

Title COO Name HOBAN, THOMAS M

DOUGHERTY, ALFRED P Name Address 4500 PGA BOULEVARD

Address 4500 PGA BOULEVARD SUITE 400

SUITE 400 City-State-Zip:

PALM BEACH GARDENS FL 33418 City-State-Zip: PALM BEACH GARDENS FL 33418

Title **TREASURER** Title ٧P

SPEER, GEORGE G Name VANDERMAY, WILLIAM R Name

4500 PGA BOULEVARD Address 4500 PGA BOULEVARD Address

SUITE 400 SUITE 400 City-State-Zip: PALM BEACH GARDENS FL 33418

City-State-Zip: PALM BEACH GARDENS FL 33418

VΡ Title

Name KITSON. TYLER W Name WOODS, ERICA S

Address 4500 PGA BOULEVARD Address 4500 PGA BOULEVARD

SUITE 400 SUITE 400

PALM BEACH GARDENS FL 33418 City-State-Zip: City-State-Zip: PALM BEACH GARDENS FL 33418

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.

04/26/2021 SIGNATURE: GEORGE G. SPEER REGISTERED AGENT