## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000032212

Entity Name: BENNIE'S, LLC.

**Current Principal Place of Business:** 

13463 SW 179 STREET MIAMI. FL 33177

**Current Mailing Address:** 

13463 SW 179 STREET MIAMI. FL 33177

FEI Number: 20-2703466 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROOKS, VELMA N 13463 SW 179 STREET MIAMI, FL 33177 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

**FILED** Apr 18, 2019

**Secretary of State** 

7752449643CC

Authorized Person(s) Detail:

Title MGRM Title **MGRM** 

CONNOR, AUSTIN Name CONNOR, JANET E Name 13463 SW 179 STREET 13463 SW 179 STREET Address Address

City-State-Zip: MIAMI FL 33177 MIAMI FL 33177 City-State-Zip:

Title **MGRM** Title **MGRM** 

Name CONNOR, JETHRO M CONNOR, RUEL B Name Address 13463 SW 179 STREET Address 13463 SW 179 STREET MIAMI FL 33177 City-State-Zip: MIAMI FL 33177 City-State-Zip:

Title **MGRM** Title **MGRM** 

Name CONNOR, GLENNIS A BROOKS, VELMA N Name Address 13463 SW 179 STREET 17790 SW 107 AVE, APT 203 Address

City-State-Zip: MIAMI FL 33177 City-State-Zip: MIAMI FL 33157

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: AUSTIN CONNOR

Electronic Signature of Signing Authorized Person(s) Detail

04/18/2019