

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000045775

**Entity Name:** BERKPLYM, LLC

**Current Principal Place of Business:**

ONE LAKE HOLLINGSWORTH DRIVE  
UNIT 4  
LAKELAND, FL 33803

**Current Mailing Address:**

ONE LAKE HOLLINGSWORTH DRIVE  
UNIT 4  
LAKELAND, FL 33803 US

**FEI Number:** 20-8732964

**Certificate of Status Desired:** No

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

WENDEL, JOHN F  
ONE LAKE HOLLINGSWORTH DRIVE  
UNIT 4  
LAKELAND, FL 33803 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 AUTHORIZED MEMBER  
Name WENDEL, JOHN F  
Address ONE LAKE HOLLINGSWORTH DRIVE  
UNIT 4  
City-State-Zip: LAKELAND FL 33803

Title AUTHORIZED MEMBER  
Name WENDEL, PEGGY M  
Address ONE LAKE HOLLINGSWORTH DRIVE  
UNIT 4  
City-State-Zip: LAKELAND FL 33803

Title AUTHORIZED MEMBER  
Name WENDEL, STEPHEN F  
Address ONE LAKE HOLLINGSWORTH DRIVE  
UNIT 4  
City-State-Zip: LAKELAND FL 33803

*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:** PEGGY WENDEL

**AUTHORIZED MEMBER**

**04/20/2019**

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

\_\_\_\_\_  
Date