

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000099366

**Entity Name:** COMMANDER & RUTH, LLC, A FLORIDA LIMITED LIABILITY COMPANY**FILED**  
**Feb 09, 2021**  
**Secretary of State**  
**0400984766CC****Current Principal Place of Business:**9808 NW 80TH AVE  
10-A  
HIALEAH GARDENS, FL 33016**Current Mailing Address:**9808 NW 80TH AVE  
10-A  
HIALEAH GARDENS, FL 33016**FEI Number: 77-0665730****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**TRYSON, AVI S  
2600 DOUGLAS ROAD  
SUITE 717  
CORAL GABLES, FL 33134 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:** AVI TRYSON**02/09/2021**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                           |                 |                           |
|-----------------|---------------------------|-----------------|---------------------------|
| Title           | MGR                       | Title           | AUTHORIZED REPRESENTATIVE |
| Name            | DIAMOND, DAVID            | Name            | JONATHAN, CALDERON        |
| Address         | 3677 E TREMONT AVE        | Address         | 9808 NW 80TH AVE<br>10-A  |
| City-State-Zip: | BRONX NY 10465            | City-State-Zip: | HIALEAH GARDENS FL 33016  |
| Title           | AUTHORIZED REPRESENTATIVE |                 |                           |
| Name            | NELSON, CALDERON          |                 |                           |
| Address         | 9808 NW 80TH AVE<br>10-A  |                 |                           |
| City-State-Zip: | HIALEAH GARDENS FL 33016  |                 |                           |

*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:** JONATHAN CALDERON**COO****02/09/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date