# 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.

OWNER/MGRM

SIGNATURE: DAVID MILLER

Electronic Signature of Signing Authorized Person(s) Detail

## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L07000041197

#### Entity Name: HAGAN O'REILLY'S IRISH PUB AND RESTAURANT, LLC

#### Current Principal Place of Business:

16112 MARSH ROAD 401 WINTER GARDEN, FL 34787

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

119 E MURIEL ST ORLANDO, FL 32806 US

### FEI Number: 20-8949947

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

MILLER, DAVID B 119 E MURIEL ST ORLANDO, FL 32806 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 :

TitleMGRMNameMILLER, DAVID BAddress119 E MURIEL STCity-State-Zip:ORLANDO FL 32806

FILED Apr 22, 2019 Secretary of State 4772460581CC

Certificate of Status Desired: No

Date

04/22/2019 Date