

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000082141

**Entity Name:** CONVERDE GROUP, LLC

**Current Principal Place of Business:**

2260 5TH AVE S, SUITE 9  
ST. PETERSBURG, FL 33712

**Current Mailing Address:**

2260 5TH AVE S, SUITE 9  
ST. PETERSBURG, FL 33712 US

**FEI Number:** 45-2958849

**Certificate of Status Desired:** No

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

ROWAN, SCOTT L  
2260 5TH AVE S, SUITE 9  
ST. PETERSBURG, FL 33712 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           MANAGING MEMBER  
Name           MUSHAHWAR, STEPHEN I  
Address        2260 5TH AVE S, SUITE 9  
City-State-Zip: ST. PETERSBURG FL 33712

Title           EXECUTIVE DIRECTOR  
Name           BERNARDICH, GEORGE S III  
Address        2260 5TH AVE S, SUITE 9  
City-State-Zip: ST. PETERSBURG FL 33712

Title           EXECUTIVE DIRECTOR  
Name           BOWLES, JAMES O.  
Address        2260 5TH AVE S, SUITE 9  
City-State-Zip: ST. PETERSBURG FL 33712

*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:** JAMES O BOWLES

**EXECUTIVE DIRECTOR**

**04/23/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date