## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000014023

Entity Name: EBERRY HARVEST COMPANY LLC

**Current Principal Place of Business:** 

4269 STATE ROAD 29 S LABELLE. FL 33935

**Current Mailing Address:** 

4269 STATE ROAD 29 S LABELLE, FL 33935 US

FEI Number: 45-4516359 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRUN, JONA S 4269 STATE ROAD 29 S LABELLE, FL 33935 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: JONA BRUN 04/13/2017

Electronic Signature of Registered Agent

Date

FILED Apr 13, 2017

**Secretary of State** 

CC5736941920

Authorized Person(s) Detail:

Title COMPTROLLER Title PRESIDENT

Name BRUN, JONA Name FLORES, REFUGIO

Address 4269 STATE ROAD 29 SOUTH Address 4269 STATE ROAD 29 SOUTH

City-State-Zip: LABELLE FL 33935 City-State-Zip: LABELLE FL 33935

Title COO

Name GUZMAN, ROBERT

Address 4269 STATE ROAD 29 SOUTH

City-State-Zip: LABELLE FL 33935

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: JONA BRUN COMPTROLLER 04/13/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date