

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000070374

**Entity Name:** CUTLER BAY CARTS LLC

**Current Principal Place of Business:**

19151 SW 108 AVE  
#23  
MIAMI, FL 33157

**FILED**  
**Jan 31, 2020**  
**Secretary of State**  
**5611263849CC**

**Current Mailing Address:**

19151 SW 108 AVE  
#23  
MIAMI, FL 33157 US

**FEI Number: 45-5368178**

**Certificate of Status Desired: Yes**

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

TAYLOR, TIMOTHY R  
8920 SW 187TH ST.  
CUTLER BAY, FL 33157 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            AMBR  
Name            TAYLOR, TIMOTHY R  
Address        8920 SW 187TH STREET  
City-State-Zip: CUTLER BAY FL 33157

Title            AMBR  
Name            SVERDLOW, BENJAMIN  
Address        6315 MARBELLA BOULEVARD  
City-State-Zip: APOLLO BEACH FL 33572

Title            AMBR  
Name            TAYLOR, BRITANI  
Address        8920 SW 187TH STREET  
City-State-Zip: CUTLER BAY FL 33757

*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: TIMOTHY TAYLOR**

**MEMBER**

**01/31/2020**

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

\_\_\_\_\_  
Date