

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000086191

Entity Name: BERGERON 2008 LLC**Current Principal Place of Business:**4530 S.W. 48TH AVE
DAVIE, FL 33314**Current Mailing Address:**4530 S.W. 48TH AVE
DAVIE, FL 33314**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BERGERON, JEAN-SYLVAIN
4530 S.W. 48TH AVE
DAVIE, FL 33314 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 MGRM
Name BERGERON, JEAN-SYLVAIN
Address 4530 S.W. 48TH AVE
City-State-Zip: DAVIE FL 33314

Title MGRM
Name BERGERON, JEAN-SYLVAIN
Address 4530 S.W. 48TH AVE
City-State-Zip: DAVIE FL 33314

Title MGRM
Name BERGERON, JEAN-SYLVAIN
Address 4530 S.W. 48TH AVE
City-State-Zip: DAVIE FL 33314

Title MGRM
Name BERGERON, JEAN-SYLVAIN
Address 4530 S.W. 48TH AVE
City-State-Zip: DAVIE FL 33314

Title MGRM
Name BERGERON, JEAN-SYLVAIN
Address 4530 S.W. 48TH AVE
City-State-Zip: DAVIE FL 33314

Title MGRM
Name BERGERON, JEAN-SYLVAIN
Address 4530 S.W. 48TH AVE
City-State-Zip: DAVIE FL 33314

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: JEAN-SYLVAIN BERGERON**PRESIDENT****03/20/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date