

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000160670

Entity Name: HOPS BROS LLC**Current Principal Place of Business:**1059 42ND AVENUE NORTHEAST
SAINT PETERSBURG, FL 33703**Current Mailing Address:**1059 42ND AVENUE NORTHEAST
SAINT PETERSBURG, FL 33703**FEI Number:** 46-1667119**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STEVENS, RALPH M
1059 42ND AVENUE NORTHEAST
SAINT PETERSBURG, FL 33703 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:** RALPH MARSHALL STEVENS

04/06/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name RUSSELL, JOHN PATRICK
Address 1059 42ND AVENUE NORTHEAST
City-State-Zip: SAINT PETERSBURG FL 33703

Title S
Name RUSSELL, JOHN PATRICK
Address 1059 42ND AVENUE NORTHEAST
City-State-Zip: SAINT PETERSBURG FL 33703

Title MGR
Name STEVENS, RALPH MARSHALL
Address 1059 42ND AVENUE NORTHEAST
City-State-Zip: SAINT PETERSBURG FL 33703

Title T
Name STEVENS, RALPH MARSHALL
Address 1059 42ND AVENUE NORTHEAST
City-State-Zip: SAINT PETERSBURG FL 33703

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: RALPH MARSHALL STEVENS

MGR

04/06/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date