

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000024922

**FILED**  
**Apr 25, 2018**  
**Secretary of State**  
**CC9610243720**

**Entity Name:** BIRTH ENTERPRISES LLC

**Current Principal Place of Business:**

3821-B TAMIAMI TRAIL #304  
PORT CHARLOTTE, FL 33952

**Current Mailing Address:**

3821-B TAMIAMI TRAIL #304  
PORT CHARLOTTE, FL 33952 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

BIRTH, JULIA  
3821-B TAMIAMI TRAIL #304  
PORT CHARLOTTE, FL 33952 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 BIRTH, DAVID  
Address 3821-B TAMIAMI TRAIL #304  
City-State-Zip: PORT CHARLOTTE FL 33952

Title AMBR  
Name BIRTH, JULIA  
Address 3821-B TAMIAMI TRAIL #304  
City-State-Zip: PORT CHARLOTTE FL 33952

Title MGR  
Name BIRTH, DAVID G JR  
Address 3821-B TAMIAMI TRAIL #304  
City-State-Zip: PORT CHARLOTTE FL 33952

*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:** JULIA BIRTH

AMBR

04/25/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date