

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000039755

**Entity Name:** BURGERLIFE, LLC

**Current Principal Place of Business:**

953 N LAKE OTIS DT. SE  
WINTER HAVEN, FL 33880

**Current Mailing Address:**

953 N LAKE OTIS DT. SE  
WINTER HAVEN, FL 33880 US

**FEI Number: 81-5458460**

**Certificate of Status Desired: No**

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

MCDANIEL, RANDALL C  
953 N LAKE OTIS DT. SE  
WINTER HAVEN, FL 33880 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 MCDANIEL, RANDALL C  
Address 953 N LAKE OTIS DT. SE  
City-State-Zip: WINTER HAVEN FL 33880

Title AMBR  
Name MCDANIEL, MELISSA  
Address 953 N LAKE OTIS DT. SE  
City-State-Zip: WINTER HAVEN FL 33880

Title AMBR  
Name MCDANIEL, TYLER D  
Address 953 N LAKE OTIS DT. SE  
City-State-Zip: WINTER HAVEN FL 33880

*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: RANDALL C MCDANIEL**

**MANAGING PARTNER**

**01/17/2020**

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

\_\_\_\_\_  
Date