

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000047687

Entity Name: YELLOWKNIVES TRIBE, LLC

Current Principal Place of Business:

6290 NW 66 WAY
PARKLAND, FL 33067

Current Mailing Address:

6290 NW 66 WAY
PARKLAND, FL 33067

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILLER, ADAM E
1937 E. ATLANTIC VLVD, #204
POMPANO BEACH, FL 33060 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 MGR
Name BRILL, DENNIS
Address 6290 NW 66 WAY
City-State-Zip: PARKLAND FL 33067

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: BRILL , DENNIS

RA

01/16/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date