## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000053429
Entity Name: 2 PLUS 2, LLC

ntity Name: 2 PLUS 2, LLC

**Current Principal Place of Business:** 

7951 SW 6TH STREET SUITE 216 PLANTATION. FL 33324

**Current Mailing Address:** 

7951 SW 6TH STREET SUITE 216 PLANTATION, FL 33324 US

FEI Number: 82-0834717 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOTO, VERONICA 151 N NOB HILL ROAD STE 151 PLANTATION, FL 33324 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

Date

FILED Mar 04, 2019

**Secretary of State** 

9498735576CC

Authorized Person(s) Detail:

Title MGR Title AMBR

Name LI, KE Name LUO, XIJING

Address 628 REYNOLDS DR Address 10020 MANDARIN ST

City-State-Zip: CHARLOTTE NC 28209 City-State-Zip: PARKLAND FL 33076

Title AMBR Title AMBR

Electronic Signature of Signing Authorized Person(s) Detail

NameJOHNSTON, EUGENENameSOTO, VERONICAAddress403 MONROE ROADAddress151 N NOB HILL ROAD

SUITE 151

City-State-Zip: CAMERON NC 28326

City-State-Zip: PLANTATION FL 33324

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: KE LI MANAGER 03/04/2019