

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000059633

Entity Name: HOFMANN, LLC

Current Principal Place of Business:

SCHMIDTHUTTE 21
HAIGER, XX D-357-08

Current Mailing Address:

SCHMIDTHUTTE 21
HAIGER, XX D-357-08 GE

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GALLE, CRAIG T
13501 SOUTH SHORE BOULEVARD
SUITE 103
WELLINGTON, FL 33414 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	Title	MGR
Name	HOFMANN, PETRA	Name	HOFMANN, DIETRICH DR.
Address	SCHMIDTHUTTE 21	Address	SCHMIDTHUTTE 21
City-State-Zip:	HAIGER XX D-357-08	City-State-Zip:	HAIGER XX D-357-08

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: PETRA HOFMANN

MGR

01/05/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date