

2019 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L17000214512

Entity Name: GOOD FUNKTION LLC

Current Principal Place of Business:

1309 LEE STREET
DELRAY BEACH, FL 33444

Current Mailing Address:

1309 LEE STREET
DELRAY BEACH, FL 33444 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PENN, ANDREW L II
3509 NW 13TH STREET
LAUDERHILL, FL 33311 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 PENN, ANDREW L II
Address 3509 NW 13TH ST
City-State-Zip: LAUDERHILL FL 33311

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: ANDREW PENN

MGR

12/06/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date