

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000240102

Entity Name: L'ATELIER DE FERNANDE RESTAURANT, LLC

Current Principal Place of Business:

11460 SW 224 TH STREET
MIAMI, FL 33170

Current Mailing Address:

11460 SW 224TH STREET
MIAMI, FL 33170 US

FEI Number: 82-3492068

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DEMOSTHENES, EMMANUEL K
11460 SW 224TH ST.
MIAMI, FL 33170 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 DEMOSTHENES, EMMANUEL K
Address 11460 SW 224TH STREET
City-State-Zip: MIAMI FL 33170

Title MGR
Name CLEOPHAT, JEAN
Address 11460 SW 224TH STREET
City-State-Zip: MIAMI FL 33170

Title MGR
Name DEMOSTHENES, TAMARA
Address 11460 SW 224TH STREET
City-State-Zip: MIAMI FL 33170

Title AMBR
Name DEMOSTHENES, TAMARA
Address 11460 SW 224TH STREET
City-State-Zip: MIAMI FL 33170

Title MANAGER
Name DEMOSTHENES, SHERLY
Address 11460 SW 224TH STREET
City-State-Zip: MIAMI FL 33170

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: TAMARA DEMOSTHENES

AMBR

03/02/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date