

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000031155

**Entity Name:** GONZO'S IMPACT LLC

**Current Principal Place of Business:**

1999 NE 168TH STREET  
APT 3  
NORTH MIAMI BEACH, FL 33162

**Current Mailing Address:**

1999 NE 168TH STREET  
APT 3  
NORTH MIAMI BEACH, FL 33162 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GONZALEZ, JOHN M  
1999 NE 168TH STREET  
APT 3  
NORTH MIAMI BEACH, FL 33162 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 AR  
Name GONZALEZ, JOHN M  
Address 1999 NE 168TH STREET  
APT 3  
City-State-Zip: NORTH MIAMI BEACH FL 33162

*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:** JOHN GONZALEZ

**OWNER**

**04/30/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date