

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000121606

Entity Name: TOWN CENTER BISTRO LLC

Current Principal Place of Business:

1679 MARKET STREET
WESTON, FL 33326

Current Mailing Address:

4095 STATE ROAD 7 STE L216
WELLINGTON, FL 33449 US

FEI Number: 83-0575999

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SLN MANAGEMENT LLC
4095 STATE ROAD 7 STE L216
WELLINGTON, FL 33449 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 MANAGER
Name GONZALEZ, EGGLEE
Address 1679 MARKET STREET
City-State-Zip: WESTON FL 33326

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: EGGLEE GONZALEZ

MANAGER

01/21/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date