## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000148247

Entity Name: ST. HILAIRE FAMILY RESTAURANT LLC

IIIe. ST. HILAINE FAMILE RESTAUNANT

**Current Principal Place of Business:** 

13383 MEMORIAL HWY. NORTH MIAMI, FL 33161

## **Current Mailing Address:**

13383 MEMORIAL HWY. NORTH MIAMI, FL 33161

FEI Number: 83-1232746 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ST. HILAIRE, ST. JULIEN 1070 NE 163RD STREET 25 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

FILED Apr 30, 2024

**Secretary of State** 

5695659257CC

## Authorized Person(s) Detail:

Title MGR

Name ST. HILAIRE, ST. JULIEN
Address 13383 MEMORIAL HWY.
City-State-Zip: NORTH MIAMI FL 33161

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: ST. JULIEN, ST. HILAIRE

**MGR** 

04/30/2024