## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000200173

Entity Name: BIKER LIFE, LLC

**Current Principal Place of Business:** 

8601 PLACIDA RD PO BOX 300

PLACIDA, FL 33946-0300

## **Current Mailing Address:**

8601 PLACIDA RD **PO BOX 300** PLACIDA, FL 33946-0300 US

FEI Number: 83-2158978 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

**BIKER LIFE LLC** 8601 PLACIDA RD PO BOX 300

PLACIDA, FL 33946-0300 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: WILLIAM OQUENDO 02/06/2024

> Date Electronic Signature of Registered Agent

## Authorized Person(s) Detail:

Title Title AUTHORIZED MEMBER OQUENDO, VIRGINIA Name OQUENDO, WILLIAM Name 8601 PLACIDA RD 8601 PLACIDA RD Address Address **PO BOX 300** PO BOX 0300

City-State-Zip: PLACIDA FL 33946-0300 City-State-Zip: PLACIDA FL 33946-0300

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.

**FILED** Feb 06, 2024

**Secretary of State** 

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