

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000218994

**Entity Name:** AGAVE BANDIDO LLC

**Current Principal Place of Business:**

12800 UNIVERSITY DRIVE  
SUITE 275  
FT MYERS, FL 33907

**Current Mailing Address:**

12800 UNIVERSITY DRIVE  
SUITE 275  
FORT MYERS, FL 33907

**FEI Number:** 84-2855146

**Certificate of Status Desired:** No

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

BAUM, MATHEW  
12800 UNIVERSITY DRIVE  
SUITE 275  
FORT MYERS, FL 33907 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 BAUM, MATHEW  
Address 12800 UNIVERSITY DRIVE, SUITE 275  
City-State-Zip: FORT MYERS FL 33907

Title MGR  
Name BAUM, HOWARD  
Address 12800 UNIVERSITY DRIVE  
SUITE 275  
City-State-Zip: FORT MYERS FL 33907

*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:** HOWARD BAUM

MGR

03/13/2023

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

\_\_\_\_\_  
Date