

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000259993

Entity Name: BURGERHIVE, LLC**Current Principal Place of Business:**4607 S UNIVERSITY
DAVIE, FL 33328**Current Mailing Address:**4607 S UNIVERSITY
DAVIE, FL 33328 US**FEI Number:** 84-3374331**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RIGAUD, LAURRIE M
4607 S UNIVERSITY
DAVIE, FL 33328 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 JOSEPH, MCASHLEY J
Address 4607 S UNIVERSITY
City-State-Zip: DAVIE FL 33328Title MGR
Name JOSEPH, CARLA L
Address 4607 S UNIVERSITY
City-State-Zip: DAVIE FL 33328Title MGR
Name RIGAUD, LAURRIE M
Address 4607 S UNIVERSITY
City-State-Zip: DAVIE FL 33328Title MGR
Name RIGAUD, ERIC
Address 4607 S UNIVERSITY
City-State-Zip: DAVIE FL 33328Title MGR
Name JOSEPH, JEROME
Address 4607 S UNIVERSITY
City-State-Zip: DAVIE FL 33328

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: MCASHLEY JOSEPH**MANAGER****06/07/2020**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date