

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000466232

**Entity Name:** PURPLE BODEGA LLC

**Current Principal Place of Business:**

82 NE 29 STREET  
MIAMI, FL 33137

**Current Mailing Address:**

82 NE 29 STREET  
MIAMI, FL 33137

**FEI Number:** 87-3423320

**Certificate of Status Desired:** No

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

KLEINFELD LEGAL ADVISORS PA  
801 NE 167 STREET  
SUITE306  
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

**Authorized Person(s) Detail :**

Title AMBR  
Name CHUNG, STEVEN  
Address 82 NE 29 STREET  
City-State-Zip: MIAMI FL 33137

Title AMBR  
Name FOSTER, DERRICK  
Address 16520 NW 11 COURT  
City-State-Zip: PEMBROKE PINES FL 33028

Title AMBR  
Name DACOSTA, KRISTOPHER  
Address 7796 SW 102 LANE  
City-State-Zip: MIAMI FL 33156

Title AMBR  
Name ALEXANDER, ADAM  
Address 11360 NW 15 COURT  
City-State-Zip: PEMBROKE PINES FL 33026

*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:** DERRICK FOSTER, JR

**MANAGER**

**04/28/2023**

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

\_\_\_\_\_  
Date