

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000191266

**Entity Name:** PREMIER CUTS LLC

**Current Principal Place of Business:**

2816 DEL PRADO BLVD S  
CAPE CORAL, FL 33904

**Current Mailing Address:**

217 SW 10TH PLACE  
CAPE CORAL, FL 33991 US

**FEI Number:** 92-3631748

**Certificate of Status Desired:** No

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

VELOZ, KYLE C  
217 SW 10TH PLACE  
CAPE CORAL, FL 33991 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           MANAGER  
Name           VELOZ, KYLE  
Address        2816 DEL PRADO BLVD S  
City-State-Zip: CAPE CORAL FL 33904

*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:** KYLE VELOZ

**MANAGER**

**05/01/2024**

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

\_\_\_\_\_  
Date