

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000402384

**Entity Name:** BRIDGES 39, LLC

**Current Principal Place of Business:**

11820 TURKEY CREEK BLVD  
ALACHUA, FL 32615

**Current Mailing Address:**

PO BOX 567  
ALACHUA, FL 32616

**FEI Number:** 93-3119294

**Certificate of Status Desired:** No

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

BOUKARI, ADAM  
11820 TURKEY CREEK BLVD.  
ALACHUA, FL 32615 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 BOUKARI, ADAM  
Address 11820 TURKEY CREEK BLVD.  
City-State-Zip: ALACHUA FL 32615

*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:** ADAM BOUKARI

MGR

04/23/2024

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

\_\_\_\_\_  
Date