## **2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M18000006197

**Entity Name: BROOKE-MERRITT LLC** 

**Current Principal Place of Business:** 

C/O SQUAR MILNER; ATTN: STEVE BLATT 11150 SANTA MONICA BLVD, STE 600

LOS ANGELES, CA 90025

## **Current Mailing Address:**

C/O SQUAR MILNER: ATTN: STEVE BLATT 11150 SANTA MONICA BLVD, STE 600 LOS ANGELES, CA 90025 US

FEI Number: 57-3467512 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS ST TALLAHASSEE, FL 32301 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:

Name

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR Title MGR

BLATT, STEVEN D BROOKE, JOAN Name Name

Address C/O SQUAR MILNER LLP Address C/O SQUAR MILNER LLP; ATTN:

> 11150 SANTA MONICA BLVD, STE 600 STEVEN D. BLATT

11150 SANTA MONICA BLVD, STE 600

City-State-Zip: LOS ANGELES CA 90025

LOS ANGELES CA 90025 City-State-Zip: Title MBR, TRUSTEE OF THE JOAN

BROOKE TRUST U/T/A DATED JANUARY 19, 1999

BROOKE, JOAN

Address C/O SQUAR MILNER LLP; ATTN:

STEVEN D. BLATT

11150 SANTA MONICA BLVD, STE 600

City-State-Zip: LOS ANGELES CA 90025

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.

Date

**FILED** Feb 17, 2020

**Secretary of State** 

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