

2019 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:** Yes**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:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR
Name	BLATT, STEVEN D
Address	C/O SQUAR MILNER LLP 11150 SANTA MONICA BLVD, STE 600

City-State-Zip: LOS ANGELES CA 90025

Title	MBR, TRUSTEE OF THE JOAN BROOKE TRUST U/T/A DATED JANUARY 19, 1999
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Name	BROOKE, JOAN
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Address	C/O SQUAR MILNER LLP; ATTN: STEVEN D. BLATT 11150 SANTA MONICA BLVD, STE 600
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City-State-Zip: LOS ANGELES CA 90025

Title	MGR
Name	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.

SIGNATURE: JOAN BROOKE

CPA

04/29/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date