#### 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: CHRISTOPHER RICHARDSON

Electronic Signature of Signing Authorized Person(s) Detail

MARIA ١Y City-State-Zip: TRINITY FL 34655

Certificate of Status Desired: Yes

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000331741

# Entity Name: R & S RESTAURANTS II LLC

#### **Current Principal Place of Business:**

33139 US HWY 19 N PALM HARBOR, FL 34684

## **Current Mailing Address:**

12912 TIKAL WAY TRINITY, FL 34655

## FEI Number: 87-1841415

# Name and Address of Current Registered Agent:

REGISTERED AGENTS INC. 7901 4TH ST N **STE 300** ST. PETERSBURG, FL 33702 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:

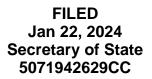
## Electronic Signature of Registered Agent

Α

Authorized Person(s) Detail :				
	Title	AMBR	Title	AMBR
	Name	RICHARDSON, CHRISTOPHER	Name	RICHARDSON, M
	Address	12912 TIKAL WAY	Address	12912 TIKAL WAY
	City-State-Zip:	TRINITY FL 34655	City-State-Zip:	TRINITY FL 346

MANAGING MEMBER

Date



01/22/2024

Date