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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PATRICK NICOLINI

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P98000105712

Entity Name: L, N & N CORP. OF 2353 N. MILITARY TRAIL

Current Principal Place of Business:

640 CLEMATIS ST. 308 WEST PALM BEACH, FL 33401

Current Mailing Address:

PO BOX 1801 DADE CITY, FL 33526

FEI Number: 65-0312251

Name and Address of Current Registered Agent:

LOGSDON, JOHN M 640 CLEMATIS ST. 308 WEST PALM BEACH, FL 33401 US FILED Jan 29, 2019 Secretary of State 2880175683CC

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	D	Title	D
Name	LOGSDON, JOHN M	Name	NICOLINI, PATRICK F
Address	640 CLEMATIS ST.	Address	P O BOX 1801
City-State-Zip:	308 WEST PALM BEACH FL 33401	City-State-Zip:	DADE CITY FL 33526
Title	D		
Name	NICOLINI, DONALD N		
Address	PO BOX 1801		
City-State-Zip:	DADE CITY FL 33526		

VP

01/29/2019

Date

a.

Date