#### 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. 03/09/2019

SIGNATURE: MATTHEW W STANCHINA

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER

Electronic Signature of Registered Agent

SIGNATURE: CRAIG S PEARLMAN

Authorized Person(s) Detail :			
Title	MGR	Title	MGR
Name	STANCHINA, ADAM	Name	STANCHINA, MATTHEW
Address	1206 N PARK AVENUE	Address	1206 N PARK AV
City-State-Zip:	WINTER PARK FL 32789	City-State-Zip:	WINTER PARK FL 32789

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.

### Name and Address of Current Registered Agent:

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

PEARLMAN, CRAIG S 2 S ORANGE AV 5TH FLR ORLANDO, FL 32801 US

WINTER PARK, FL 32789

# **Current Mailing Address:**

1206 N PARK AVENUE WINTER PARK. FL 32789 US

### FEI Number: 20-1155520

1206 N PARK AVENUE

## Entity Name: STANCHINA FAMILY PARTNERS, LLC

DOCUMENT# L04000031320

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

FILED Mar 09, 2019

### Secretary of State 9777094628CC

Certificate of Status Desired: No

03/09/2019 Date

Date