

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000017530

Entity Name: SHANJAN, LLC**Current Principal Place of Business:**2468 S CORAL TRACE CIR
DELRAY BEACH, FL 33445**Current Mailing Address:**2468 S CORAL TRACE CIR
DELRAY BEACH, FL 33445**FEI Number:** 02-0768675**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOWELL, SEAN S
2468 S. CORAL TRACE CIR.
DELRAY BEACH, FL 33445 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	PRESIDENT
Name	HOWELL, SEAN S
Address	2468 S CORAL TRACE CIR
City-State-Zip:	DELRAY BEACH FL 33445

Title	AUTHORIZED MEMBER
Name	HOWELL, JANA O
Address	2468 S CORAL TRACE CIR
City-State-Zip:	DELRAY BEACH FL 33445

Title	AUTHORIZED MEMBER
Name	HOWELL, SHANICE S
Address	2468 S CORAL TRACE CIR
City-State-Zip:	DELRAY BEACH FL 33445

Title	AUTHORIZED REPRESENTATIVE
Name	HOWELL, SEANNA J
Address	2468 S CORAL TRACE CIR
City-State-Zip:	DELRAY BEACH FL 33445

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: SEAN S HOWELL**PRESIDENT****03/29/2020**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date