

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000085693

**Entity Name:** 845 NORTH ATLANTIC BLVD, LLC**Current Principal Place of Business:**853 N. FORT LAUDERDALE BEACH BLVD  
FORT LAUDERDALE, FL 33304**Current Mailing Address:**853 N. FORT LAUDERDALE BEACH BLVD  
FORT LAUDERDALE, FL 33304 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LALWANI, DEVKRISHIN  
853 N FORT LAUDERDALE BEACH BLVD  
FORT LAUDERDALE, FL 33304 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:** DEVKRISHIN LALWANI

02/08/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                                      |
|-----------------|--------------------------------------|
| Title           | MGR                                  |
| Name            | LALWANI, NARAIN                      |
| Address         | 853 N. FORT LAUDERDALE BEACH<br>BLVD |
| City-State-Zip: | FORT LAUDERDALE FL 33304             |

|                 |                                      |
|-----------------|--------------------------------------|
| Title           | MGR                                  |
| Name            | LALWANI, DEVKRISHIN                  |
| Address         | 853 N. FORT LAUDERDALE BEACH<br>BLVD |
| City-State-Zip: | FORT LAUDERDALE FL 33304             |

|                 |                                      |
|-----------------|--------------------------------------|
| Title           | MGR                                  |
| Name            | LALWANI, MOHAN                       |
| Address         | 853 N. FORT LAUDERDALE BEACH<br>BLVD |
| City-State-Zip: | FORT LAUDERDALE FL 33304             |

*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:** MOHAN LALWANI

MANAGER

02/08/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date