

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000002197

**Entity Name:** LSN PARTNERS, LLC**Current Principal Place of Business:**801 ARTHUR GODFREY ROAD STE 401  
MIAMI BEACH, FL 33140**Current Mailing Address:**801 ARTHUR GODFREY ROAD STE 401  
MIAMI BEACH, FL 33140**FEI Number:** 27-1646758**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HECKLER, ALEXANDER P  
801 ARTHUR GODFREY ROAD STE 401  
MIAMI BEACH, FL 33140 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	MGR
Name	HECKLER, ALEXANDER P
Address	801 ARTHUR GODFREY ROAD STE 401
City-State-Zip:	MIAMI BEACH FL 33140

Title	MGR
Name	ZIENTZ HECKLER, TIFFANY
Address	801 ARTHUR GODFREY ROAD STE 401
City-State-Zip:	MIAMI BEACH FL 33140

Title	MANAGER
Name	LLORENTE, MARCELO
Address	801 ARTHUR GODFREY ROAD STE 401
City-State-Zip:	MIAMI BEACH FL 33140

*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:** TIFFANY ZIENTZ HECKLER

MGR

01/22/2020

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date