2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000048630

Entity Name: AN FAMILY TRUST, LLC

Current Principal Place of Business:

4661 FOUNTAINS DR. S.

UNIT 209

LAKE WORTH, FL 33467

Current Mailing Address:

4661 FOUNTAINS DR. S.

UNIT 209

LAKE WORTH, FL 33467

FEI Number: 30-0734697 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NAMAIANDEH, ANGELA S 4661 FOUNTAINS DR. S. UNIT 209

LAKE WORTH, FL 33467 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:

Address

Electronic Signature of Registered Agent

Date

FILED Apr 12, 2018

Secretary of State

CC1911406354

Authorized Person(s) Detail:

Title AUTHORIZED MEMBER

Name NAMAIANDEH, ALI

4661 FOUNTAINS DR. S. UNIT 209

City-State-Zip: LAKE WORTH FL 33467

SIGNATURE: ANGELA NAMAIANDEH

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.

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER

Date

04/12/2018