

2021 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AUTHORIZED MEMBER
Name NAMAIANDEH, ALI
Address 4661 FOUNTAINS DR. S.
UNIT 209
City-State-Zip: LAKE WORTH FL 33467

Title MANAGER/AUTHORIZED MANAGER
Name NAMAIANDEH, ANGELA SUE
Address 4661 FOUNTAINS DR. S.
UNIT 209
City-State-Zip: LAKE WORTH FL 33467

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: ANGELA S. NAMAIANDEH

MANAGER/AUTHORIZED MEMBER 03/09/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date