

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000075211

**Entity Name:** 533 CONRADI L.L.C.

**Current Principal Place of Business:**

7854 PARLIAMENT CT  
TALLAHASSEE, FL 32309

**Current Mailing Address:**

7854 PARLIAMENT CT  
TALLAHASSEE, FL 32309

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HUGGHINS, ARLEY  
7854 PARLIAMENT CT  
TALLAHASSEE, FL 32309 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:** ARLEY HUGGHINS

01/16/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	ASSISTANT MANAGER
Name	HUGGHINS, ARLEY	Name	HUGGHINS, KRISTIN
Address	7854 PARLIAMENT CT	Address	7854 PARLIAMENT CT
City-State-Zip:	TALLAHASSEE FL 32309	City-State-Zip:	TALLAHASSEE FL 32309

*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:** ARLEY HUGGHINS

MGR

01/16/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date