

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000136358

**Entity Name:** JOLAUREN LLC

**Current Principal Place of Business:**

1602 ALTON #365  
MIAMI, FL 33139

**Current Mailing Address:**

1602 ALTON #365  
MIAMI, FL 33139

**FEI Number:** 47-1702003

**Certificate of Status Desired:** No

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

CIOFFI, JOSEPH  
1602 ALTON #365  
MIAMI, FL 33139 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	AMBR	Title	AMBR
Name	CIOFFI, LAUREN	Name	CIOFFI, JOSEPH H
Address	1602 ALTON #365	Address	1602 ALTON #365
City-State-Zip:	MIAMI FL 33139	City-State-Zip:	MIAMI FL 33139

*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:** JOSEPH CIOFFI

**AGENT**

**01/05/2022**

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

\_\_\_\_\_  
Date