

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000173322

**Entity Name:** KALI LLC**Current Principal Place of Business:**1732 FARMINGTON CIRCLE  
WELLINGTON, FL 33414**Current Mailing Address:**1732 FARMINGTON CIRCLE  
WELLINGTON, FL 33414 US**FEI Number:** 47-3614704**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PIIRA, JONNA M  
1732 FARMINGTON CIRCLE  
WELLINGTON, FL 33414 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	JP ADVISORS LLC
Address	1732 FARMINGTON CIRCLE
City-State-Zip:	WELLINGTON FL 33414

Title	MGR
Name	MINDALA, JAMES
Address	9640 WEATHERVANE DR
City-State-Zip:	CHAGRIN FALLS OH 44023

Title	MGR
Name	SHAKE, SARA
Address	420 SE 19TH STREET
City-State-Zip:	FORT LAUDERDALE FL 33316

Title	MGR
Name	ANGELO, TOM
Address	515 E LAS OLAS BLVD - STE 850
City-State-Zip:	FT LAUDERDALE FL 33301

*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:** JONNA PIIRA**MEMBER****06/26/2020**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date