

**2021 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L15000186149

**Entity Name:** LALOSI LLC

**Current Principal Place of Business:**

2600 S DOUGLAS RD  
SUITE 607  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2600 S DOUGLAS RD  
SUITE 607  
CORAL GABLES, FL 33134 US

**FEI Number:** 30-0922316

**Certificate of Status Desired:** No

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

CORPORATE COMPLIANCE AGENTS, INC.  
7901 4TH ST N  
SUITE 300  
ST. PETERSBURG, FL 33702 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:** SANDRA SAINZ

05/18/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name OSIO, OSWALDO  
Address 2600 S DOUGLAS RD  
SUITE 607  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name OSIO, AIDE DE  
Address 2600 S DOUGLAS RD  
SUITE 607  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name OSIO OSIO, LUIS R  
Address 2600 S DOUGLAS RD  
SUITE 607  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name OSIO OSIO, OSWALDO  
Address 2600 S DOUGLAS RD  
SUITE 607  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name OSIO OSIO, JOHANNA  
Address 2600 S DOUGLAS RD  
SUITE 607  
City-State-Zip: CORAL GABLES FL 33134

*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:** OSWALDO OSIO

MGR

05/18/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date