

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000010606

Entity Name: LM COVRE LLC**Current Principal Place of Business:**7901 KINGSPONTE PKWY STE 15
ORLANDO, FL 32819**Current Mailing Address:**7901 KINGSPONTE PKWY STE 15
ORLANDO, FL 32819 US**FEI Number:** 32-0484232**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**INTERNATIONAL DIVISION BY LARSON LLC
7901 KINGSPONTE PKWY STE 15
ORLANDO, FL 32819 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:** CAROLINE G LARSON

01/03/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MANAGER
Name	COVRE, MARCOS R
Address	RUA MIGUEL DAMHA 640
City-State-Zip:	CAMPO GRANDE MS 79046-140

Title	MANAGER
Name	REIS VAZ DE MOURA COVRE, LUCIANA
Address	RUA MIGUEL DAMHA 640
City-State-Zip:	CAMPO GRANDE MS 79046-140

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: MARCOS R COVRE

MANAGER

01/03/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date