

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000094460

Entity Name: RAS LAVRAR, LLC**Current Principal Place of Business:**6409 CONGRESS AVENUE, SUITE 100
BOCA RATON, FL 33314**Current Mailing Address:**6409 CONGRESS AVENUE, SUITE 100
BOCA RATON, FL 33314 US**FEI Number:** 81-2690405**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VCORP SERVICES, LLC
1200 S PINE ISLAND ROAD
PLANTATION, FL 33324 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	SCHNEID, DAVID J
Address	6409 CONGRESS AVE #100
City-State-Zip:	BOCA RATON FL 33487

Title	AMBR
Name	LAVRAR, FLYNN
Address	6901 NW 6TH STREET
City-State-Zip:	PLANTATION FL 33317

Title	AMBR
Name	ALLEN NETHKEN, KRYSTAL
Address	525 N TRYON STREET STE 1600
City-State-Zip:	CHARLOTTE NC 28202

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: SCHNEID , DAVID J

MGR

04/19/2022

Electronic Signature of Signing Authorized Person(s) Detail_____
Date