

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000094642

**Entity Name:** LAIKA HOLDINGS, LLC

**Current Principal Place of Business:**

1035 E ROBSON ST  
APT A  
TAMPA, FL 33604

**FILED**  
**May 26, 2020**  
**Secretary of State**  
**6832873415CC**

**Current Mailing Address:**

1035 E ROBSON ST  
APT A  
TAMPA, FL 33604

**FEI Number: 81-2969795**

**Certificate of Status Desired: No**

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

BOWLES, MARGARET ESQ  
4600 W CYPRESSST  
SUITE 130  
TAMPA, FL 33607 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  
Name            HESS, CHRISTIE  
Address        1035 E ROBSON ST APT A  
City-State-Zip: TAMPA FL 33604

Title            AMBR  
Name            HESS, STUART J  
Address        1035 E ROBSON ST APT A  
City-State-Zip: TAMPA FL 33604

*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: CHRISTIE HESS**

**AMBR**

**05/26/2020**

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

\_\_\_\_\_  
Date