

**2024 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

**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

03/25/2024

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

\_\_\_\_\_  
Date