

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000022444

**Entity Name:** LISETTE, LLC

**Current Principal Place of Business:**

87 SPARKILL ST,  
APT 2  
WATERTOWN, MA 02472

**Current Mailing Address:**

87 SPARKILL ST,  
APT 2  
WATERTOWN, MA 02472 US

**FEI Number:** 82-4157318

**Certificate of Status Desired:** No

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

TELLEZ, LISETTE G  
12950 NEVADA STREET  
CORAL GABLES, FL 33156 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 TELLEZ, LISETTE G  
Address 87 SPARKILL ST,  
APT 2  
City-State-Zip: WATERTOWN MA 02472

*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:** LISETTE TELLEZ

**MANAGER**

**01/15/2020**

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

\_\_\_\_\_  
Date