			Certificate of Status Desired: Yes	
ne and Ao	ddress of Current Registered Agent:	:		
- 65TH TER	AGEMENT, LLC R. NORTH ACH, FL 33413 US			
above named	entity submits this statement for the purpose of change	ing its registered office or r	egistered agent, or both, in the Sta	te of Florida.
NATURE:	PETER LURTZ			01/13/2024
	Electronic Signature of Registered Agent			Date
horized P	Person(s) Detail :			
	AUTHORIZED REPRESENTATIVE	Title	MANAGER	
e	LAKESIDE MANAGEMENT, LLC	Name	LURTZ KARIN	

Entity Name: 306 SOUTH LAKESIDE, LLC **Current Principal Place of Business:**

DOCUMENT# L18000097855

197 - 65TH TERR. NORTH WEST PALM BEACH, FL 33413

Current Mailing Address:

197 - 65TH TERR. NORTH WEST PALM BEACH. FL 33413 US

FEI Number: NOT APPLICABLE

Nam

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

LAKE 197 - (WEST

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: KARIN LURTZ

MANAGER

01/13/2024 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 13, 2024 Secretary of State

Cartificate of Status Desired: Vos

5213470271CC

SIGN

Auth Title Name LAKESIDE MANAGEMENT, LLC LURTZ, KARIN Name Address PO BOX 970844 197 - 65TH TERR. NORTH Address City-State-Zip: BOCA RATON FL 33497 City-State-Zip: WEST PALM BEACH FL 33413