

**2022 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L18000136095

**Entity Name:** LIDIAWAY LLC

**Current Principal Place of Business:**

11930 N. BAYSHORE DRIVE  
1409  
NORTH MIAMI, FL 33181

**Current Mailing Address:**

11930 N. BAYSHORE DRIVE  
1409  
NORTH MIAMI, FL 33181

**FEI Number:** 85-1966986

**Certificate of Status Desired:** Yes

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

MOFFATT, CARINA  
11930 N. BAYSHORE DRIVE  
1409  
NORTH MIAMI, FL 33181 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:** CARINA MOFFATT

08/10/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                                |                 |                                |
|-----------------|--------------------------------|-----------------|--------------------------------|
| Title           | MGR                            | Title           | MGR                            |
| Name            | MOFFATT, CARINA                | Name            | MOFFATT, DIEGO                 |
| Address         | 11930 N. BAYSHORE DRIVE # 1409 | Address         | 11930 N. BAYSHORE DRIVE # 1409 |
| City-State-Zip: | NORTH MIAMI FL 33181           | City-State-Zip: | NORTH MIAMI FL 33181           |

*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:** CARINA MOFFATT

MANAGER

08/10/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date