

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000167213

**Entity Name:** 15320 SW 106 TER LLC

**Current Principal Place of Business:**

10845 SW 89 ST  
MIAMI, FL 33176

**Current Mailing Address:**

C/O OTTO HAMANN  
8835 SW 107 AVE #147  
MIAMI, FL 33176 US

**FEI Number:** 83-1203580

**Certificate of Status Desired:** No

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

HAMANN, OTTO E  
10845 SW 89 ST  
MIAMI, FL 33176 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            OTTO E HAMANN REVOCABLE LIVING TRUST  
Address        C/O OTTO HAMANN  
                  8835 SW 107 AVE #147  
City-State-Zip: MIAMI FL 33176

*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:** OTTO E HAMANN

**REGISTERED AGENT**

**03/07/2022**

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

\_\_\_\_\_ Date