

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000197455

**Entity Name:** LALA FARM LLC

**Current Principal Place of Business:**

13373 BOB BURNSSED ROAD  
GLEN ST. MARY, FL 32040

**Current Mailing Address:**

PO BOX 1132  
MACCLENNY, FL 32063 US

**FEI Number:** 83-1610842

**Certificate of Status Desired:** Yes

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

ROBINSON, RICK H  
13373 BOB BURNSSED ROAD  
GLEN ST. MARY, FL 32040 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	Title	AMBR
Name	ROBINSON, RICK H	Name	ROBINSON, KIMBERLY
Address	PO BOX 1132	Address	PO BOX 1132
City-State-Zip:	MACCLENNY FL 32063	City-State-Zip:	MACCLENNY FL 32063

*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:** KIMBERLY A ROBINSON

**OWNER**

**04/16/2024**

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

\_\_\_\_\_  
Date