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.
--

Electronic Signature of Signing Authorized Person(s) Detail

Authorized Person(s) Detail :				
Title	MGR	Title	MGR	
Name	CAMCHE, ROBERT	Name	CAMCHE, LESLIE	
Address	4603 WINDWARD COVE LANE	Address	4603 WINDWARD COVE LANE	
City-State-Zip:	WELLINGTON FL 33449	City-State-Zip:	WELLINGTON FL 33449	

### 4603 WINDWARD COVE LANE WELLINGTON, FL 33449 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.

CAMCHE, ROBERT

### SIGNATURE:

Electronic Signature of Registered Agent

WELLINGTON, FL 33449

### Name and Address of Current Registered Agent:

406 DELRAY BEACH, FL 33445

## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000273825

Entity Name: FAIRHAVEN EQUITIES LLC

# **Current Principal Place of Business:**

601 N.CONGRESS AVE

**Current Mailing Address:** 

4603 WINDWARD COVE LANE

FEI Number: 84-3667392

01/18/2020

Date

### FILED Jan 18, 2020 Secretary of State 0569862139CC

Certificate of Status Desired: No

Date

MANAGER