

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000330472

**Entity Name:** GOLLAN LLC

**Current Principal Place of Business:**

201 CRANDON BLVD APT 173  
KEY BISCAYNE, FL 33149

**Current Mailing Address:**

201 CRANDON BLVD APT 173  
KEY BISCAYNE, FL 33149 UN

**FEI Number:** 85-3834807

**Certificate of Status Desired:** No

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

FAILO, CAMILA  
201 CRANDON BLVD APT 173  
KEY BISCAYNE, FL 33149 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 MGR  
Name FAILO, CAMILA  
Address 201 CRANDON BLVD APT 173  
City-State-Zip: KEY BISCAYNE FL 33149

*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:** CAMILA FAILO

MGR

03/10/2022

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

\_\_\_\_\_ Date