

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000362090

Entity Name: TARA LANE, LLC**Current Principal Place of Business:**7717 NW 20TH LANE
GAINESVILLE, FL 32605**Current Mailing Address:**7717 NW 20TH LANE
GAINESVILLE, FL 32605 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MOUKHTARA, SAYED
7717 NW 20TH LANE
GAINESVILLE, FL 32605 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, MANAGER
Name	MOUKHTARA, SAYED
Address	7717 NW 20TH LANE
City-State-Zip:	GAINESVILLE FL 32605

Title	AUTHORIZED MEMBER
Name	LASSEN, BERIT H
Address	7717 NW 20TH LANE
City-State-Zip:	GAINESVILLE FL 32605

Title	AUTHORIZED MEMBER
Name	TIGER FAMILY TRUST
Address	7807 NW 18TH LANE
City-State-Zip:	GAINESVILLE FL 32605

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: SAYED MOUKHTARA

MANAGER

01/25/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date