

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000441042

Entity Name: LIVVEN LLC

Current Principal Place of Business:

1530 W CASS ST APT 1310
TAMPA, FL 33606

Current Mailing Address:

1530 W CASS ST APT 1310
TAMPA, FL 33606 US

FEI Number: 87-3974924

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HEINOLD, THOMAS
1530 W CASS ST APT 1310
TAMPA, FL 33606 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 HEINOLD, THOMAS
Address 1530 W CASS ST APT 1310
City-State-Zip: TAMPA FL 33606

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: THOMAS HEINOLD

MEMBER

04/15/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date