## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000005054

Entity Name: LARIAN, L.L.C.

**Current Principal Place of Business:** 

10800 LAKESIDE DRIVE CORAL GABLES. FL 33156

**Current Mailing Address:** 

10800 LAKESIDE DRIVE CORAL GABLES. FL 33156

FEI Number: 65-0940152 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HECHTKOPF, LARA 5195 NW 77 AVENUE MIAMI, FL 33166 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: LARA HECHTKOPF 01/14/2019

Electronic Signature of Registered Agent

Date

**FILED** Jan 14, 2019

**Secretary of State** 

1361818525CC

Authorized Person(s) Detail:

Title MGR Title MGR

SCHENKMAN, JOEL Name SCHENKMAN, RANDY Name 10800 LAKESIDE DRIVE Address 10800 LAKESIDE DRIVE Address City-State-Zip: CORAL GABLES FL 33156 City-State-Zip: CORAL GABLES FL 33156

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.