

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L99000005054

**Entity Name:** LARIAN, L.L.C.

**Current Principal Place of Business:**

9075 SW 87 AVE  
STE 412  
MIAMI, FL 33176

**Current Mailing Address:**

10800 LAKESIDE DRIVE  
CORAL GABLES, FL 33156 UN

**FEI Number:** 65-0940152

**Certificate of Status Desired:** No

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

HECHTKOPF, LARA  
9075 SW 87TH AVENUE, SUITE 412  
MIAMI, FL 33176 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

03/02/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	SCHENKMAN, JOEL	Name	SCHENKMAN, RANDY
Address	10800 LAKESIDE DRIVE	Address	10800 LAKESIDE DRIVE
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.*

**SIGNATURE:** JOEL SCHENKMAN

MGR

03/02/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date