L16000117248

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Business Entry Name)							
(Decument Number)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							





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COVER LETTER

_	stration Section tion of Corporations		•
SUBJECT:	LANADA LLC		
	Na	ame of Limited Li	ability Company
Dear Sir or M	1adam:		
The enclosed	Registered Agent/Registered O	ffice Change and	fee(s) are submitted for filing.
Please return	all correspondence concerning t	his matter to the f	ollowing:
Douglas J. Jef	frey, Esq.		
	Name of Person		_
Law Offices o	of Douglas J. Jeffrey, P.A.		
	Firm/Company		
6625 Miami L	akes Drive East, Suite 365		
	Address		
Miami Lakes,	Florida 33014		
	City/State and Zip Code		
dj@jeffreylaw	vfirm.com		
E-mail	address: (to be used for future a	nnual report notifi	cation)
For further in	nformation concerning this matte	er, please call:	
Douglas J. Jef	ffrey, Esq.	305 at (828-4744
	Name of Person		Area Code & Daytime Telephone Number
Regi Divi P.O.	ling Address: istration Section sion of Corporations Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Engl	osed is a check for the following	ng amount:	
\S \s:	25 Filing Fee	□ \$:	55 Filing Fee & Certified Copy

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida

I. Na	ame of the limited liability company: LANADA LLC			_	
2 (a)	4801 S UNIVERSITY DR. SUITE 204	Œ	4801 S UNIVERSITY DR. SULTE 204		
	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	·	Mailing address of limited liability company:	<u>—</u>	
	DAVIE, FL 33328		(Note: MAY BE POST OFFICE BOX) DAVIE, FL 33328		
			ON VIL., T. I. 23328	_	
				_	
	06/17/2016		L16000117248		
3.	Date of filing/registration in Florida 4.		Document number		
5. (a)	hlw services lic		_1	~3	
	Registered Agent and Registered Office shown on the records of the Fi	lorida	i Dept. of State:	022 H	771
	Registered Office Address (MUST BE FLORIDA STREET ADDI	RESS		~	
	5301 SW 38th Ave			HAY 24	
	Fort Lauderdale FL 333	12	SE G	PH	Ш
(b)	Douglas J. Jeffrey, Esq.		可 (一) (数::	կ։ 08	\circ
	Enter name of NEW Registered Agent and/or NEW Registered Offs	çe ail	dress	08	
	NEW Registered Office Address:				
	6625 Miami Lakes Drive East, Suite 365		·a		
	Miami Lakes	14			
change agent v was/we the arti ingrai inervisit the obi to mero notified	imited liability company is not organized under the laws of corchanges are made, the Florida street address of the regional limited liabilities and the identical. Or, in the case of a Florida limited liabilities authorized by an affirmative vote of the members of the icles of organization or the operating agreement of the limit the properties of a member of authorized experiments of a member by accept the appointment as registered agent and agree to the proper and complete performances of my position as respected agent as provided for all statutes relative to the proper and complete performances of my position as respected agent as provided for all writing prints change. Division of Corporations P.O. Box	stern y co : lim : lim j acr j acr in (in this capacity. I further agree to comply with ance of my duties, and I am familiar with and accument is being fill portrum that the limited liability company.	North D	ds c,uc

FILING FEE: \$25.00

INHS18 (2/14)

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