

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000026807

**Entity Name:** LOWINGER TRUST, LLC

**Current Principal Place of Business:**

12 RYAN RD.  
EDISON, NJ 08817

**Current Mailing Address:**

12 RYAN RD.  
EDISON, NJ 08817

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

LOWINGER, EDWARD  
3625 NORTH COUNTRY CLUB DRIVE, UNIT 2106  
AVENTURA, FL 33180 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 MGR  
Name LOWINGER, EDWARD  
Address 3625 NORTH COUNTRY CLUB DRIVE,  
UNIT 2106  
City-State-Zip: AVENTURA FL 33180

*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:** EDWARD LOWINGER

MGR

01/29/2019

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date