## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000053170

Entity Name: LOISREGINAME, LLC.

#### **Current Principal Place of Business:**

5149 SW 71 PLACE MIAMI, FL 33155

### **Current Mailing Address:**

5149 SW 71 PLACE MIAMI, FL 33155

# FEI Number: APPLIED FOR

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

DIAMOND, MURRY 5149 SW 71 PLACE MIAMI, FL 33155 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	: MURRY DIAMOND		04/20/2016
	Electronic Signature of Registered Agent		Date
Authorized Person(s) Detail :			
Title	MGRM, MANAGER	Title	MANAGER, AUTHORIZED MEMBER,
Name	DIAMOND, MURRY		AUTHORIZED REPRESENTATIVE MURRY DIAMOND REVOCABLE LIVING TRUST
Address	5149 SW 71 PLACE	Name	
City-State-Zip:	MIAMI FL 33155	Address	5149 SW 71 PLACE
		City-State-Zip:	MIAMI FL 33155

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: MURRY DIAMOND

MANAGER

04/20/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date

## FILED Apr 20, 2016 Secretary of State CC0600511762

Certificate of Status Desired: No