## 2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L15000054023

Entity Name: LOTUSILASHES, LLC

**Current Principal Place of Business:** 

Current Principal Place of Bus

674 NW 177 ST APT 219

MIAMI GARDENS, FL 33169

**Current Mailing Address:** 

674 NW 177 ST. APT 219

MIAMI GARDENS, FL 33169 US

FEI Number: 58-9643268 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LISA MAHOMES 674 NW 177 ST APT 219

MIAMI GARDENS, FL 33169 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: LISA MAHOMES 07/16/2020

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title AMBR

Name MAHOMES, LISA Address 674 NW177 ST

**APT 219** 

City-State-Zip: MIAMI GARDENS FL 33169

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: LISA D MAHOMES LISA D MAHOMES

Electronic Signature of Signing Authorized Person(s) Detail

MAHOMES 07/16/2020

Date

FILED Jul 16, 2020

**Secretary of State** 

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