

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000170647

Entity Name: LAM USA INTERNATIONAL TRANSPORT, LLC**Current Principal Place of Business:**2792 NW 24TH ST #110
MIAMI, FL 33142**Current Mailing Address:**2792 NW 24TH ST #110
MIAMI, FL 33142 US**FEI Number:** 46-5672991**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MATHIS, BRIAN K
515 E LAS OLAS BLVD
FT LAUDERDALE, FL 33301 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 AMBR
Name BARAN, OZAN
Address 2792 NW 24TH ST #110
City-State-Zip: MIAMI FL 33142

Title AMBR
Name MAKZUME, TIMUR
Address ZERGERDEN SOK NO 25
City-State-Zip: EMIRGAN SARIYER ISTANBUL TUR

Title AMBR
Name MAKZUME, SELIM DENIZ
Address ATIATURK BULVART NO 73/1 31200
City-State-Zip: ISKENDERUN HATAY TURKEY AL

Title MGR
Name ALVAREZ, ARTURO
Address 8710 SW 158 PLACE
City-State-Zip: MIAMI FL 33193

Title MANAGER
Name SENOCAK, ARMAN VIVIEN
Address 3470 E COAST AVENUE
1106
City-State-Zip: MIAMI FL 33137

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: ARMAN SENOCAK

MANAGER

03/23/2020

Electronic Signature of Signing Authorized Person(s) Detail_____
Date