

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000190804

**Entity Name:** LARSON FAMILY LLC

**Current Principal Place of Business:**

6105 PRIMROSE AVE  
INDIANAPOLIS, IN 46220

**Current Mailing Address:**

6105 PRIMROSE AVE  
INDIANAPOLIS, IN 46220 US

**FEI Number:** 83-1722753

**Certificate of Status Desired:** No

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

FLORIDA FILING & SEARCH SERVICES, INC.  
155 OFFICE PLAZA DRIVE  
TALLAHASSEE, FL 32301 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 AP  
Name LARSON, STEVE  
Address 6105 PRIMROSE AVE  
City-State-Zip: INDIANAPOLIS IN 46220

*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:** STEVEN LARSON

**MANAGER**

**03/26/2020**

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

\_\_\_\_\_  
Date