

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000228766

**Entity Name:** USNE 212 MELISSA LLC

**Current Principal Place of Business:**

26 DUBLIN CT  
LATHAM, NY 12110

**Current Mailing Address:**

PO BOX 518  
LATHAM, NY 12110

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

LITON, SHAFIQUAL  
1317 EDGEWATER DR  
#415  
ORLANDO, FL 32804 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 LITON, AFROZA  
Address 26 DUBLIN CT  
City-State-Zip: LATHAM NY 12110

Title AMBR  
Name LITON, SHAFIQUAL  
Address 1317 EDGEWATER DR  
#415  
City-State-Zip: ORLANDO FL 32804

*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:** SHAFIQUAL LITON

AMBR

03/23/2021

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

\_\_\_\_\_  
Date