ddress of Current Registered Agent:			
ORIA IXIE HIGHWAY 13 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.			
: VICTORIA LOWELL			01/03/2021
Electronic Signature of Registered Agent			Date
Person(s) Detail :			
MGR	Title	CEO	
LOWELL, VICTORIA	Name	LOWELL, VICTORIA	
6619 SOUTH DIXIE HIGHWAY	Address	6619 SOUTH DIXIE HIGHWAY	
CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134	
PST			
LOWELL, VICTORIA			
6619 SOUTH DIXIE HIGHWAY			
CORAL GABLES FL 33134			
	DRIA XIE HIGHWAY H3 US Pentity submits this statement for the purpose of changing its reg VICTORIA LOWELL Electronic Signature of Registered Agent Person(s) Detail : MGR LOWELL, VICTORIA 6619 SOUTH DIXIE HIGHWAY CORAL GABLES FL 33134 PST LOWELL, VICTORIA 6619 SOUTH DIXIE HIGHWAY	DRIA   XIE HIGHWAY   13 US   Pentity submits this statement for the purpose of changing its registered office or regist   Pentity submits this statement for the purpose of changing its registered office or regist   Pentity submits this statement for the purpose of changing its registered office or regist   Pentity submits this statement for the purpose of changing its registered office or regist   Electronic Signature of Registered Agent   Person(s) Detail :   MGR Title   LOWELL, VICTORIA Name   6619 SOUTH DIXIE HIGHWAY Address   CORAL GABLES FL 33134 City-State-Zip:   PST LOWELL, VICTORIA   6619 SOUTH DIXIE HIGHWAY Keine Sing Sing Sing Sing Sing Sing Sing Sing	DRIA XIE HIGHWAY 13 US Pentity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fice Person(S) Detail : MGR Title CEO LOWELL, VICTORIA Name LOWELL, VICTORIA 6619 SOUTH DIXIE HIGHWAY Address 6619 SOUTH DIXIE HIGHWAY CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134 PST LOWELL, VICTORIA 6619 SOUTH DIXIE HIGHWAY

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: VICTORIA LOWELL

Electronic Signature of Signing Authorized Person(s) Detail

01/03/2021

Date

PRESIDENT

# FILED Jan 03, 2021 Secretary of State 8696086661CC

Certificate of Status Desired: No

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L1900000051

Entity Name: LOWELL FINANCIAL GROUP, LLC

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

6619 SOUTH DIXIE HIGHWAY CORAL GABLES, FL 33134

# **Current Mailing Address:**

6619 SOUTH DIXIE HIGHWAY CORAL GABLES. FL 33134 US

## FEI Number: 83-3234153

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