

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000003209

**Entity Name:** GOTLOVIN LLC

**Current Principal Place of Business:**

11419 W PALMETTO PARK RD #970321  
BOCA RATON, FL 33497

**Current Mailing Address:**

11419 W PALMETTO PARK RD #970321  
BOCA RATON, FL 33497

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

GOOD VIBE STRATEGIES LLC  
11419 W PALMETTO PARK RD  
#970321  
BOCA RATON, FL 33497 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           GOOD VIBE STRATEGIES LLC  
Name           GOOD VIBE STRATEGIES LLC  
Address        11419 W PALMETTO PARK RD  
                  #970321  
City-State-Zip: BOCA RATON FL 33497

*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:** JASON S. HANSRA

C.E.O.

04/26/2019

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

\_\_\_\_\_ Date