

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000245481

**Entity Name:** MASTER LASHING, LLC

**Current Principal Place of Business:**

5996 MILFORD HAVEN PL  
ORLANDO, FL 32829

**Current Mailing Address:**

5996 MILFORD HAVEN PL  
ORLANDO, FL 32829 US

**FEI Number: 85-2769562**

**Certificate of Status Desired: Yes**

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

FAIL SAFE ACCOUNTING, LLC  
20 S ROSE AVE  
SUITE 4  
KISSIMMEE, FL 34741 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 GARCIA, HEYDY  
Address 5996 MILFORD HAVEN PL  
City-State-Zip: ORLANDO FL 32829

*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: HEYDY GARCIA**

**MGR**

**04/12/2022**

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

\_\_\_\_\_  
Date