

**2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M22000005888

**Entity Name:** HAVANESE, LLC

**Current Principal Place of Business:**

6555 NE HILLTOP LANE  
DAYTON, OR 97114

**Current Mailing Address:**

6555 NE HILLTOP LANE  
DAYTON, OR 97114

**FEI Number:** 83-0655249

**Certificate of Status Desired:** No

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

EVENSTAD, GRACE  
3800 RUM ROW  
NAPLES, FL 34102 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 EVENSTAD, GRACE  
Address 3800 RUM ROW  
City-State-Zip: NAPLES FL 34102

Title MBR  
Name EVENSTAD, GRACE  
Address 3800 RUM ROW  
City-State-Zip: NAPLES FL 34102

Title AP  
Name EVENSTAD, GRACE  
Address 3800 RUM ROW  
City-State-Zip: NAPLES FL 34102

Title CEO  
Name FIELD, BENJAMIN  
Address 6555 NORTHEAST HILLTOP LANE  
City-State-Zip: DAYTON OR 97114

Title SECRETARY  
Name O'BRYANT, STEPHANIE  
Address 6555 NORTHEAST HILLTOP LANE  
City-State-Zip: DAYTON OR 97114

*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:** STEPHANIE O'BRYANT

**SECRETARY**

**01/13/2025**

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

\_\_\_\_\_  
Date