## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L03000038994

Entity Name: SOJA, LLC

# Current Principal Place of Business:

C/O MICHAEL MAZZOLA 278 ROUTE 202 SOMERS, NY 10589

## **Current Mailing Address:**

C/O MICHAEL MAZZOLA 278 ROUTE 202 SOMERS, NY 10589

## FEI Number: 20-1056291

### Name and Address of Current Registered Agent:

CHIUMENTO, MICHAEL D 145 CITY PLACE SUITE 301 PALM COAST, FL 32164 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

#### Authorized Person(s) Detail :

	Title	MGRM	Title	MGRM
	Name	LUPINACCI, NICHOLAS	Name	MAZZOLA, MICHAEL J
	Address	PO BOX 265	Address	278 ROUTE 202
	City-State-Zip:	BALDWIN PLACE NY 10505	City-State-Zip:	SOMERS NY 10589
	Title	MGRM	Title	MGRM
	Name Address	THE KRISTI A CHIUMENTO REVOCABLE TRUST 145 CITY PLACE SUITE 301	Name	STAGLIANO, ANTHONY
			Address	29 CHEYENNE CRT
			City-State-Zip:	PALM COAST FL 32137
	City-State-Zip:	PALM COAST FL 32164		
	Title	MGRM		
	Name	BHPI CORP.		
	Address	2344 QUAKER CHURCH ROAD		

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.

MEMBER

#### SIGNATURE: MICHAEL MAZZOLA

City-State-Zip: YORKTOWN NY 10598

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Apr 22, 2016 Secretary of State CC4458915035

Certificate of Status Desired: No

Date