## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000072072

Entity Name: A&Z LLC

FILED
Apr 10, 2015
Secretary of State
CC3190080274

**Current Principal Place of Business:** 

4500 BAYMEADOWS ROAD

APT. 2

JACKSONVILLE, FL 32217

**Current Mailing Address:** 

PO BOX 2261

ORANGE PARK, FL 32067 US

FEI Number: 11-3786320 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AMIN, MOHAMMAD B 4500 BAYMEADOWS ROAD APT. 2 JACKSONVILLE, FL 32217 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 Title MGR

Name AMIN, NUSRAT N Name AMIN, MOHAMMAD B

Address 599 CHIVAS CT Address 599 CHIVAS CT.

City-State-Zip: ORANGE PARK FL 32073 City-State-Zip: ORANGE PARK FL 32073

Title MGRM Title MGRM

NameBASIL, ALEESHBA NNameBASIL, ZEENIA NAddress599 CHIVAS CTAddress599 CHIVAS CT.

City-State-Zip: ORANGE PARK FL 32073 City-State-Zip: ORANGE PARK FL 32073

Title MGRM

Name BASIL, HADI Address 599 CHIVAS CT.

City-State-Zip: ORANGE PARK FL 32073

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: MOHAMMAD BASIL AMIN

**PRESIDENT** 

04/10/2015