# 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: HOYT, PATRICIA E

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: PATRICIA HOYT Electronic Signature of Registered Agent

## Authorized Person(s) Detail ·

Authorized Person(s) Detail :		
Title	MGRM	
Name	HOYT, PATRICIA E	
Address	15363 SW 32ND TER	
City-State-Zip:	MIAMI FL 33185	

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT	

DOCUMENT# L08000033295

Entity Name: FORZZI OPTICAL GROUP, LLC

#### **Current Principal Place of Business:**

15363 SW 32ND TER MIAMI, FL 33185

#### **Current Mailing Address:**

15363 SW 32 ND TER MIAMI, FL 33185 US

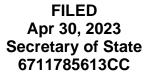
### FEI Number: 26-2313112

### Name and Address of Current Registered Agent:

HOYT, PATRICIA E 15363 SW 32ND TER #12 MIAMI, FL 33185 US

PRESIDENT

Electronic Signature of Signing Authorized Person(s) Detail



04/30/2023 Date

Certificate of Status Desired: No

04/30/2023 Date