

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000001901

**Entity Name:** AIZONE LLC

**Current Principal Place of Business:**

19976 HAZELTINE PL  
ASHBURN, VA 20147

**Current Mailing Address:**

19976 HAZELTINE PL  
ASHBURN, VA 20147 US

**FEI Number:** 47-2673366

**Certificate of Status Desired:** No

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

BATHICHE, ROLA  
2039 NEW STONECASTLE TRC  
APT 213  
WINTER PARK, FL 32792 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 BATHICHE, ROLA  
Address 19976 HAZELTINE PL  
City-State-Zip: ASHBURN VA 20147

Title MGR  
Name REID, TONI  
Address 2674 AMBERLY LANE  
City-State-Zip: TROY MI 48084

Title MGR  
Name EID, GEORGE  
Address 19976 HAZELTINE PL  
City-State-Zip: ASHBURN VA 20147

Title MGR  
Name EID, RAMI  
Address 19976 HAZELTINE PL  
City-State-Zip: ASHBURN VA 20147

*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:** TONI REID

**MANAGER**

**01/17/2020**

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

\_\_\_\_\_  
Date