

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000123369

**FILED  
May 01, 2019  
Secretary of State  
9687641351CC**

**Entity Name:** SEVAR LLC

**Current Principal Place of Business:**

6950 SOUTHGATE BLVD  
APT 206  
TAMARAC, FL 33321

**Current Mailing Address:**

6950 SOUTHGATE BLVD  
APT 206  
TAMARAC, FL 33321 US

**FEI Number:** 30-1081811

**Certificate of Status Desired:** No

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

TAX CARE MIRAMAR  
15800 PINES BLVD  
SUITE 331  
PEMBROKE PINES, FL 33027 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            AMBR  
Name            ANDALUZ, HIMMLER  
Address        6950 SOUTHGATE BLVD APT 206  
City-State-Zip: TAMARAC FL 33321

Title            AMBR  
Name            AGUILAR, LERIDA  
Address        6950 SOUTHGATE BLVD APT 206  
City-State-Zip: TAMARAC FL 33321

*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:** LERIDA AGUILAR

**MANAGER**

**05/01/2019**

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

\_\_\_\_\_  
Date