

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000256207

Entity Name: EFATZ LLC

Current Principal Place of Business:

580 SW LAKOTA AVENUE
PORT SAINT LUCIE, FL 34953

Current Mailing Address:

580 SW LAKOTA AVENUE
PORT SAINT LUCIE, FL 34953 US

FEI Number: 83-2430920

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOPEZ, HECTOR
580 SW LAKOTA AVENUE
PORT SAINT LUCIE, FL 34953 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 CEO
Name LOPEZ, HECTOR
Address 580 SW LAKOTA AVENUE
City-State-Zip: PORT SAINT LUCIE FL 34953

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: HECTOR LOPEZ

06/15/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date