

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000098623

**Entity Name:** LEVEZA LLC

**Current Principal Place of Business:**

1501 VENERA AVE  
SUITE 325  
CORAL GABLES, FL 33146

**Current Mailing Address:**

PO BOX 561716  
MIAMI, FL 33256 ES

**FEI Number:** 83-4455447

**Certificate of Status Desired:** No

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

MICHAEL BLANCO CPA PA INC.  
1501 VENERA AVE  
SUITE 325  
CORAL GABLES, FL 33146 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:** SOFIA BLANCO

04/29/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name MAIDA, FERNANDO  
Address PO BOX 561716  
City-State-Zip: MIAMI FL 33256

Title MGR  
Name MAIDA, ALEJANDRO  
Address PO BOX 561716  
City-State-Zip: MIAMI FL 33256

Title MGR  
Name MAIDA, MARCELA  
Address PO BOX 561716  
City-State-Zip: MIAMI FL 33256

Title MGR  
Name MAIDA, MARIANO  
Address PO BOX 561716  
City-State-Zip: MIAMI FL 33256

Title MGR  
Name DEL RIO, JUAN  
Address PO BOX 561716  
City-State-Zip: MIAMI FL 33256

Title MGR  
Name BLANCO, SOFIA  
Address PO BOX 561716  
City-State-Zip: MIAMI FL 33256

*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:** SOFIA BLANCO

MANAGER

04/29/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date