

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000118586

**Entity Name:** ALEXA ZERRATE LLC

**Current Principal Place of Business:**

1002B S CHURCH AVE  
TAMPA, FL 33629

**Current Mailing Address:**

PO BOX 10343  
TAMPA, FL 33679

**FEI Number:** 83-4601186

**Certificate of Status Desired:** No

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

ZERRATE, ALEXA  
1002B S CHURCH AVE  
TAMPA, FL 33629 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 ZERRATE, ALEXA  
Address PO BOX 10343  
City-State-Zip: TAMPA FL 33679

*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:** ALEXA ZERRATE

MGR

09/01/2020

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

\_\_\_\_\_  
Date