# 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000185424

Entity Name: BLZA PRO LLC

## **Current Principal Place of Business:**

4437 LAUREL PL WESTON, FL 33332

## **Current Mailing Address:**

4437 LAUREL PL WESTON, FL 33332

# FEI Number: 84-2590631

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

DE MENDONCA, CAMILA 4437 LAUREL PL WESTON, FL 33332 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: CAMILA DE MENDONCA

Electronic Signature of Registered Agent

## Authorized Person(s) Detail :

Title AMBR Name DE MENDONCA MACEDO, CAMILA Address 4437 LAUREL PL City-State-Zip: WESTON FL 33332

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: DE MENDONCA MACEDO CAMILA

AMBR

01/04/2021

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 04, 2021 Secretary of State 0656048945CC

Certificate of Status Desired: No

01/04/2021

Date

Date