

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000108387

**Entity Name:** MI BUZON LLC

**Current Principal Place of Business:**

11555 CENTRAL PARKWAY  
STE 502  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

11555 CENTRAL PKWY  
502  
JACKSONVILLE, FL 32224 US

**FEI Number:** 85-0815038

**Certificate of Status Desired:** Yes

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

ROBLES, CHRISTIAN A  
11555 CENTRAL PKWY  
502  
JACKSONVILLE , FL 32224 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 ROBLES, CHRISTIAN A  
Address 4915 BAYMEADOWS RD  
11 D  
City-State-Zip: JACKSONVILLE FL 32217

Title MGR  
Name VEGA, IAN G  
Address 56 WILD ELM AVE  
City-State-Zip: PONTE VEDRA FL 32081

*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:** CHRISTIAN ROBLES

**MANAGER**

**01/10/2023**

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

\_\_\_\_\_  
Date