

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000284526

**Entity Name:** AMAYA BEXLEY, LLC

**Current Principal Place of Business:**

16718 BALANCE COVE  
LAND O' LAKES, FL 34638

**Current Mailing Address:**

16718 BALANCE COVE  
LAND O' LAKES, FL 34638 US

**FEI Number:** 85-3090955

**Certificate of Status Desired:** No

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

SHAH, KUNAL J  
17852 ALTHEA BLUE PLACE  
LUTZ, FL 33558 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 AMBR  
Name SHAH, KUNAL J  
Address 17852 ALTHEA BLUE PLACE  
City-State-Zip: LUTZ FL 33558

Title AMBR  
Name SHAH, AMISHA P  
Address 17852 ALTHEA BLUE PLACE  
City-State-Zip: LUTZ FL 33558

Title MGR  
Name SHAH, JASHWANT N  
Address 2103 FOREST GATE DR WEST  
City-State-Zip: JACKSONVILLE FL 32246

*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:** KUNAL SHAH

**PARTNER**

**01/30/2023**

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

\_\_\_\_\_  
Date