

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000068609

**Entity Name:** BEST OF UZ LLC

**Current Principal Place of Business:**

6516 36TH AV S  
TAMPA, FL 33619

**Current Mailing Address:**

6516 36TH AV S  
TAMPA, FL 33619 US

**FEI Number:** 86-2440072

**Certificate of Status Desired:** No

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

GARCIA, IDARMIS  
6516 36TH AV S  
TAMPA, FL 33619 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            PRESIDENT  
Name            GARCIA, IDARMIS  
Address        6516 36TH AV S  
City-State-Zip: TAMPA FL 33619

*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:** IDARMIS GARCIA

**PRESIDENT**

**02/21/2023**

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

\_\_\_\_\_  
Date