

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000139766

**Entity Name:** MAXUL LLC

**Current Principal Place of Business:**

10185 COLLINS AVE  
609  
BAL HARBOUR, FL 33154

**Current Mailing Address:**

10185 COLLINS AVE  
609  
BAL HARBOUR, FL 33154

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

FILE FLORIDA CO.  
629 SW 1ST AVE.  
FORT LAUDERDALE, FL 33301 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:** DAVID FELD

03/16/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title PRES  
Name LEVANTSEVICH, MAXIM  
Address 10185 COLLINS AVE APT 609  
City-State-Zip: BAL HARBOUR FL 33154

*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:** MAXIM LEVANTSEVICH

PRESIDENT

03/16/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date