## **2023 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L21000212123

Entity Name: ZAR RENTALS LLC

**Current Principal Place of Business:** 

5099 NW FIDDLE LEAF CT. PORT SAINT LUCIE, FL 34986

**Current Mailing Address:** 

5099 NW FIDDLE LEAF CT.

PORT SAINT LUCIE, FL 34986 US

FEI Number: 86-3878911 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAZARRE, JUNIOR JUDNEL 5575 S. SEMORAN BLVD. 36 ORLANDO, FL 32822 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: JUNIOR LAZARRE 01/27/2023

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title AMBR Title AMBR

Name LAZARRE, JUNIOR J Name LAZARRE, JUVENS J

Address 5099 NW FIDDLE LEAF CT. Address 5099 NW FIDDLE LEAF CT.

City-State-Zip: PORT SAINT LUCIE FL 34986 City-State-Zip: PORT SAINT LUCIE FL 34986

Title AMBR

Name AUGSTE, WILKENS M
Address 5099 NW FIDDLE LEAF CT.
City-State-Zip: PORT SAINT LUCIE FL 34986

SIGNATURE: JUNIOR LAZARRE

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.

Electronic Signature of Signing Authorized Person(s) Detail

JUNIOR LAZARRE

01/27/2023

FILED Jan 27, 2023

**Secretary of State** 

4093075472CR

Date