2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000212966

Entity Name: VIRTUAL ZEN ASSISTANT, LLC

Current Principal Place of Business:

120 CHIEFS WAY SUITE 1, PMB #234 PENSACOLA, FL 32507

Current Mailing Address:

120 CHIEFS WAY SUITE 1, PMB #234 PENSACOLA, FL 32507

FEI Number: 87-1216637 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REYNOLDS, ALISAN O 120 CHIEFS WAY SUITE 1, PMB #234 PENSACOLA, FL 32507 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:

Name

Electronic Signature of Registered Agent

Date

FILED Apr 30, 2025

Secretary of State

2114286642CC

Authorized Person(s) Detail:

Title AUTHORIZED REPRESENTATIVE Title CEO, MANAGER, AUTHORIZED

MEMBER

Name REYNOLDS, ALISAN OLIVIA Address PMB #234

Address PMB #234

City-State-Zip: PENSACOLA FL 32507

City-State-Zip: PENSACOLA FL 32507

Title AUTHORIZED MEMBER
Name BOYD, SHELBY M.
Address 120 CHIEFS WAY
SUITE 1, PMB #234

PASCUAL, BLAISE J.

City-State-Zip: PENSACOLA FL 32507

SIGNATURE: ALISAN REYNOLDS

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.