

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000054564

**Entity Name:** AZARI T. BENJAMIN, PL

**Current Principal Place of Business:**

4400 N FEDERAL HWY.  
SUITE 53  
BOCA RATON, FL 33431

**Current Mailing Address:**

PO BOX 547011  
SURFSIDE, FL 33154 US

**FEI Number:** 20-1405752

**Certificate of Status Desired:** No

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

BENJAMIN, AZARI T  
100 S BISCAYNE BLVD  
SUITE S3170  
MIAMI , FL 33131 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:** AZARI BENJAMIN

02/10/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name BENJAMIN, AZARI  
Address PO BOX 547011  
City-State-Zip: SURFSIDE 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:** AZARI BENJAMIN

MGR

02/10/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date