## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000054564

Entity Name: AZARI T. BENJAMIN, PL

Current Principal Place of Business:

2851 NE 183RD ST

603

AVENTURA, FL 33160

**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 2851 NE 183RD ST 603

AVENTURA, FL 33160 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 02/08/2024

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

SIGNATURE: AZARI BENJAMIN

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.

**MGR** 

FILED Feb 08, 2024

**Secretary of State** 

5186850070CC