

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000012037

Entity Name: THE FLORIDIANZ LLC

Current Principal Place of Business:

12713 20TH ST E
PARRISH, FL 34219

Current Mailing Address:

PO BOX 121
ELLENTON, FL 34222

FEI Number: 27-1796646

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ZOELLNER, CALVIN C
12713 20TH ST E
PARRISH, FL 34219 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name ZOELLNER, CALVIN C
Address 12713 20TH ST EAST
City-State-Zip: PARRISH FL 34219

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: CALVIN C ZOELLNER

MGRM

01/28/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date