## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000127713

Entity Name: MUZA, L.L.C.

**Current Principal Place of Business:** 

429 ROVINO AVE.

CORAL GABLES. FL 33156

**Current Mailing Address:** 

429 ROVINO AVE.

CORAL GABLES. FL 33156

FEI Number: 45-3774929 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ISSAKOVITCH, LIOUDMILA 429 ROVINO AVE. CORAL GABLES, FL 33156 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

**FILED** Feb 23, 2015

**Secretary of State** 

CC8869632803

Authorized Person(s) Detail:

Title MGRM

Title **MGRM** 

VALERII LEONTIVE TRUST Name LIOUDMILA ISSAKOVITCH TRUST Name

**429 ROVINO AVENUE** Address 429 ROVINO AVE. Address

City-State-Zip: CORAL GABLES FL 33156 City-State-Zip: CORAL GABLES FL 33156

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: LIOUDMILA ISSAKOVITCH

**MUZA LLC** 

02/23/2015