

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000076987

**Entity Name:** VELEZ/IRZYK LLC

**Current Principal Place of Business:**

3619 W. SAN JUAN ST.  
TAMPA, FL 33629

**Current Mailing Address:**

3619 W. SAN JUAN ST.  
TAMPA, FL 33629

**FEI Number:** 81-2327468

**Certificate of Status Desired:** No

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

VELEZ, EDWIN M  
3619 W. SAN JUAN ST.  
TAMPA, FL 33629 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	MGR	Title	MGR
Name	VELEZ, EDWIN M	Name	IRZYK, BARBARA A
Address	3619 W. SAN JUAN ST.	Address	3619 W. SAN JUAN ST.
City-State-Zip:	TAMPA FL 33629	City-State-Zip:	TAMPA FL 33629

*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:** EDWIN VELEZ

**MANAGER**

**04/29/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date