

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000007389

**Entity Name:** MAZY, LLC.

**Current Principal Place of Business:**

2415 SE 23RD PL  
OCALA, FL 34471

**Current Mailing Address:**

P.O. BOX 5669  
OCALA, FL 34478 US

**FEI Number:** 81-5192059

**Certificate of Status Desired:** No

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

ZYSEK, JEFFREY  
2415 SE 23RD PL  
OCALA, FL 34471 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	AMBR	Title	AMBR
Name	ZYSEK, JEFFREY	Name	MAZZURCO, SUEANNE
Address	P.O. BOX 5669	Address	P.O. BOX 5669
City-State-Zip:	OCALA FL 34478	City-State-Zip:	OCALA FL 34478

*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:** JEFFREY ZYSEK

AMBR

03/31/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date