

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000023258

Entity Name: MAZAL MOCHE LLC

Current Principal Place of Business:

NORTH KEENE ROAD
APT 629A
CLEARWATER, FL 33577

Current Mailing Address:

POB 4134
CLEARWATER, FL 33758 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOSHE, AMIR A MR
629A NORTH KEENE RD
APT A
CLEARWATER, FL 33755 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
Name MOCHE, MAZAL M MISS
Address HALOHAMIM 21
City-State-Zip: HOLON X 58112-02

Title MGR
Name MOSHE, AMIR A MR
Address POB 4134
City-State-Zip: CLEARWATER FL 33755

Title MGR
Name MOSHE, MAAYAN
Address 629 NORTH KEENE RD APT A
City-State-Zip: CLEARWATER FL 33755

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: AMIR MOSHE

MGR

04/14/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date