2021 FLORIDA LIMITED LIABILITY COMP	ANY ANNUAL REPORT
DOCUMENT# L17000240184	

Entity Name: AMAIZE AVENTURA LLC

# **Current Principal Place of Business:**

2258 S UNIVERSITY DR DAVIE, FL 33324

# **Current Mailing Address:**

2258 S UNIVERSITY DR DAVIE, FL 33324 US

### FEI Number: 38-4053833

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

SALVER & COOK LLP 2721 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 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	E: VANESSA PIEDRAHITA			02/23/2021	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER		
Name	COHEN, KAREN ARMANDO	Name	GARCIA, ANDRES ELOY		
Address	2258 S UNIVERSITY DR	Address	2258 S UNIVERSITY DR		
City-State-Zip:	DAVIE FL 33324	City-State-Zip:	DAVIE FL 33324		
Title	AUTHORIZED MEMBER				
Name	STRULOVIC, ALBERT				
Address	2258 S UNIVERSITY DR				
City-State-Zip:	DAVIE FL 33324				

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: KAREN ARMANDO COHEN

AUTHORIZED MEMBER 02/23/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Feb 23, 2021 Secretary of State 8968113415CC

Certificate of Status Desired: Yes