

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000190410

**Entity Name:** ZAMNA LLC

**Current Principal Place of Business:**

1177 SAWGRASS CORPORATE PKWY  
SUNRISE, FL 33323

**Current Mailing Address:**

PSC 2 BOX 2877  
APO, OC 96264 US

**FEI Number:** 61-6607602

**Certificate of Status Desired:** No

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

MAZZA, JULIA  
1177 SAWGRASS CORPORATE PKWY  
SUNRISE, FL 33323 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	PRESIDENT	Title	VP
Name	MAZZA, JULIA	Name	ALMADA, RODRIGO
Address	PSC 2 BOX 2877	Address	PSC 2 BOX 2877
City-State-Zip:	APO OC 96264	City-State-Zip:	APO OC 96264

*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:** JULIA MAZZA

**PRESIDENT**

**03/11/2024**

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

\_\_\_\_\_  
Date