

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000281032

**Entity Name:** 4 EYES GROUP LLC

**Current Principal Place of Business:**

1438 SPRINGSIDE DR.  
WESTON, FL 33326

**Current Mailing Address:**

1438 SPRINGSIDE DR.  
WESTON, FL 33326

**FEI Number:** 84-3823520

**Certificate of Status Desired:** No

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

CASYA BUSINESS SOLUTIONS CORP  
15800 PINES BLVD  
SUITE 305  
PEMBROKE PINES, FL 33027 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	DIAZ, GABRIEL	Name	YORIS, EDNA
Address	1438 SPRINGSIDE DR	Address	1438 SPRINGSIDE DR
City-State-Zip:	WESTON FL 33326	City-State-Zip:	WESTON FL 33326

*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:** GABRIEL DIAZ

AMBR

06/09/2020

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

\_\_\_\_\_  
Date