

**2021 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L19000292642

**Entity Name:** ISAIDEDEAL LLC

**Current Principal Place of Business:**

152 NW CALIFORNIA BLVD  
PORT SAINT LUCIE, FL 34986

**Current Mailing Address:**

1254 NW LEONARDO CIRCLE  
PORT ST LUCIE, FL 34986 US

**FEI Number:** 84-3809102

**Certificate of Status Desired:** No

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

SELMANI, ASLLAN  
1254 NW LEONARDO CIRCLE  
PORT ST LUCIE, FL 34986 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 SELMANI, MALBORA  
Address 1254 NW LEONARDO CIRCLE  
City-State-Zip: PORT ST LUCIE FL 34986

Title MGR  
Name ILJAZI, XHARIJE  
Address 779 NW LEONARDO CIRCLE  
City-State-Zip: PORT SAINT LUCIE FL 34986

Title MGR  
Name DEMIROVIC, KADIRE  
Address 1284 NW LEONARDO CIRCLE  
City-State-Zip: PORT SAINT LUCIE FL 34986

Title AMBR  
Name SELMANI, ASIIAN  
Address 1254 NW LEONARDO CIRCLE  
City-State-Zip: PORT ST LUCIE FL 34986

*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:** XHARIJE ILJAZI

**MANAGER**

**02/19/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date