

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000118276

**Entity Name:** CLOUDYWIZARD L.L.C.

**Current Principal Place of Business:**

110 NORTH FEDERAL HIGHWAY  
APT. 701  
FORT LAUDERDALE, AL 33301

**Current Mailing Address:**

P.O. BOX 811117  
BOCA RATON, FL 33481 US

**FEI Number: 85-1015605**

**Certificate of Status Desired: Yes**

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

LALAMA, ROMMY A  
6715 E CALUMET CIRCLE  
LAKE WORTH, FL 33467 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           | AMGR                                 | Title           | MGR                   |
| Name            | SANCHEZ, ALFREDO                     | Name            | LALAMA, ROMMY A       |
| Address         | 110 NORTH FEDERAL HIGHWAY APT<br>701 | Address         | 6715 E CALUMET CIRCLE |
| City-State-Zip: | FORT LAUDERDALE FL 33301             | City-State-Zip: | LAKEWORTH FL 33467    |

*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: ROMMY LALAMA

MGR

03/10/2022

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

\_\_\_\_\_  
Date