

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000138243

**Entity Name:** MS.DYNIRIE, LLC

**Current Principal Place of Business:**

830 ORIOLE AVE  
MIAMI SPRINGS, FL 33166

**Current Mailing Address:**

830 ORIOLE AVE  
MIAMI SPRINGS, FL 33166 US

**FEI Number:** 85-1126141

**Certificate of Status Desired:** No

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

VAZQUEZ, DYNIRIE  
830 ORIOLE AVE  
MIAMI SPRINGS, FL 33166 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 OTHER  
Name VAZQUEZ, DYNIRIE  
Address 820 ORIOLE AVE.  
City-State-Zip: MIAMI SPRINGS FL 33166

*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:** DYNIRIE VAZQUEZ

OTHER

04/09/2021

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

\_\_\_\_\_  
Date