

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000211041

**Entity Name:** BTZ ENTERPRISES LLC

**Current Principal Place of Business:**

189 BEAR ISLAND TRAIL  
PONTE VEDRA, FL 32081

**Current Mailing Address:**

189 BEAR ISLAND TRAIL  
PONTE VEDRA, FL 32081 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

UNITED STATES CORPORATION AGENTS, INC.  
476 RIVERSIDE AVE.  
JACKSONVILLE, FL 32202 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	ZEHREN, BRIAN	Name	ZEHREN, KRISTINA
Address	189 BEAR ISLAND TRAIL	Address	189 BEAR ISLAND TRAIL
City-State-Zip:	PONTE VEDRA FL 32081	City-State-Zip:	PONTE VEDRA FL 32081

*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:** BRIAN ZEHREN

AMBR

01/28/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date