

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000395690

Entity Name: TAMIZ OPP FUND LLC**Current Principal Place of Business:**4708 CAPITAL CIRCLE NW
TALLAHASSEE, FL 32303**Current Mailing Address:**1701 HERMITAGE BLVD
100
TALLAHASSEE, FL 32308 UN**FEI Number:** 92-0289928**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MANAUSA, DANIEL
1701 HERMITAGE BLVD
100
TALLAHASSEE, FL 32308 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	GHAZVINI, JUSTIN
Address	4708 CAPITAL CIRCLE NW
City-State-Zip:	TALLAHASSEE FL 32303

Title	MGR
Name	GHAZVINI, MEHRAN
Address	4708 CAPITAL CIRCLE NW
City-State-Zip:	TALLAHASSEE FL 32303

Title	MGR
Name	GHAZVINI, JASON
Address	4708 CAPITAL CIRCLE NW
City-State-Zip:	TALLAHASSEE FL 32303

Title	MGR
Name	GHAZVINI, BEHZAD
Address	4708 CAPITAL CIRCLE NW
City-State-Zip:	TALLAHASSEE FL 32303

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: JUSTIN GHAZVINI**MANAGER****04/18/2023**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date