

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000419835

**Entity Name:** MARILYN A CRUZ LLC

**Current Principal Place of Business:**

1915 BRICKELL AVE  
APT C1009  
MIAMI, FL 33129

**Current Mailing Address:**

1915 BRICKELL AVE  
C1009  
MIAMI, FL 33129

**FEI Number:** 88-4127029

**Certificate of Status Desired:** No

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

CRUZ, MARILYN A  
1915 BRICKELL AVE  
APT C1009  
MIAMI, FL 33129 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  
Name            CRUZ, MARILYN A  
Address        1915 BRICKELL AVE C1009  
City-State-Zip: MIAMI FL 33129

*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:** MARILYN A CRUZ

**PRESIDENT**

**02/09/2024**

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

\_\_\_\_\_  
Date