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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JENNIFER LOPEZ

Electronic Signature of Signing Officer/Director Detail

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000024278

Entity Name: MR. MULTISERVICES, INC.

Current Principal Place of Business:

17035 44TH PL NORTH LOXAHATCHEE, FL 33470

Current Mailing Address:

17035 44TH PLACE NORTH LOXAHATCHEE, FL 33470 US

FEI Number: 01-0886822

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

RAMOS AGUILAR, MIGUEL ARTURO 17035 44TH PLACE NORTH LOXAHATCHEE, FL 33470 US

Certificate of Status Desired: No

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:

| Officer/Director Detail : | | | |
|---------------------------|------------------------------|-----------------|------------------------|
| Title | Р | Title | VP |
| Name | RAMOS AGUILAR, MIGUEL ARTURO | Name | LOPEZ, JENNIFER |
| Address | 17035 44TH PLACE NORTH | Address | 17035 44TH PLACE NORTH |
| City-State-Zip: | LOXAHATCHEE FL 33470 | City-State-Zip: | LOXAHATCHEE FL 33470 |

02/24/2017

FILED Feb 24, 2017 Secretary of State CC6646227370

Date

V.P.

Date