

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000047203

Entity Name: V.F.S. SERVICES, LLC

Current Principal Place of Business:

7901 KINGSPONTE PARKWAY
SUITE 19
ORLANDO, FL 32819

Current Mailing Address:

7901 KINGSPONTE PARKWAY
SUITE 19
ORLANDO, FL 32819 US

FEI Number: 80-0128958

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LARSON ACCOUNTING & CONSULTING SERVICES
8615 COMMODITY CIR STE 6
ORLANDO, FL 32819 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 MANAGER
Name DOS REIS, AGNALDO
Address 7901 KINGSPONTE PARKWAY
 SUITE 19
City-State-Zip: ORLANDO FL 32819

Title MANAGER
Name SILVA, CARLOS J
Address 7901 KINGSPONTE PARKWAY
 SUITE 19
City-State-Zip: ORLANDO FL 32819

Title MANAGING MEMBER
Name COSTA, ADRIANA B
Address 1823 ALAMBRA CIRCLE
City-State-Zip: ORLANDO FL 32703

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: CARLOS SILVA

MANAGER

04/28/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date