2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000032752

Entity Name: LMG SERVICES, LLC

Current Principal Place of Business:

10893 NW 17TH ST UNIT 116 MIAMI, FL 33172

Current Mailing Address:

10893 NW 17TH ST UNIT 116 MIAMI, FL 33172 US

FEI Number: 20-1146203

Name and Address of Current Registered Agent:

ORTEGA, FERNANDO CPA 10893 NW 17TH ST UNIT 116 MIAMI, FL 33172 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

Authorized Person(s) Detail :

City-State-Zip: MIAMI FL 33172

| | Title | MGR | Title | MGRM |
|--|-----------------|------------------------------|-----------------|------------------------------|
| | Name | LORET DE MOLA, FERNANDO J | Name | LORETDEMOLA, MARIA E |
| | Address | 10893 NW 17TH ST UNIT 116 | Address | 10893 NW 17TH ST UNIT 116 |
| | City-State-Zip: | MIAMI FL 33172 | City-State-Zip: | MIAMI FL 33172 |
| | Title | MGRM | Title | MGRM |
| | Name | LORET DE MOLA, JULIO A | Name | LORET DE MOLA, ANA C |
| | Address | 10893 NW 17TH ST UNIT 116 | Address | 10893 NW 17TH ST UNIT 116 |
| | City-State-Zip: | MIAMI FL 33172 | City-State-Zip: | MIAMI FL 33172 |
| | Title | MGRM | | |
| | Name | LORET DE MOLA, ANDRES | | |
| | Address | 10893 NW 17TH ST UNIT 116 | | |
| | | | | |

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: FERNANDO LORET DE MOLA

MANAGER

02/12/2019

Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 12, 2019 Secretary of State 0290810876CC

Certificate of Status Desired: Yes

Date