## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000060586

Entity Name: JMC PACKAGING SOLUTIONS, LLC

### **Current Principal Place of Business:**

5013 N HIATUS RD SUNRISE, FL 33351

## **Current Mailing Address:**

5013 N HIATUS RD SUNRISE, FL 33351 US

# FEI Number: 20-5205531

Name and Address of Current Registered Agent:

ACCOUNTAX OFFICE SERVICES, CORP. 16772 NW 67 AVE. MIAMI, FL 33015 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 :

Title	MGRM	Title	MGRM
Name	ITURBE, JULIAN G	Name	FLORES VARGAS, CESAR A
Address	5013 N HIATUS RD	Address	5013 N HIATUS RD
City-State-Zip:	SUNRISE FL 33351	City-State-Zip:	SUNRISE FL 33351
Title	MGR		
Name	FLORES VARGAS, MARCOS A		
Address	5013 N HIATUS RD		
City-State-Zip:	SUNRISE FL 33351		

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: JULIAN G ITURBE

MANAGER

## 04/02/2015

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 02, 2015 Secretary of State CC0814941945

Certificate of Status Desired: No

Date

Date