

2018 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L10000032019

Entity Name: FIDES, LLC

Current Principal Place of Business:

C/O DAN ROGERS CPA, 5586 MAIN STREET
SUITE 1G
WILLIAMSVILLE, NY 14221

Current Mailing Address:

C/O DAN ROGERS CPA, 5586 MAIN STREET
SUITE 1G
WILLIAMSVILLE, NY 14221 US

FEI Number: 27-2187790

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASACCI, JOSEPH R ESQUIRE
111 NORTH PINE ISLAND ROAD
SUITE 104
PLANTATION, FL 33324 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: JOSEPH R CASACCI

12/10/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name LEMPKO, MARK
Address 5586 MAIN STREET 1G
City-State-Zip: WILLIAMSVILLE NY 14221

Title MGRM
Name ROGERS, DANIEL
Address 5586 MAIN STREET 1G
City-State-Zip: WILLIAMSVILLE NY 14221

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: MARK LEMPKO

MANAGER

12/10/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date