I hereby certify that the information indicated on this report or supplemental report is true and accurate a oath; that I am a managing member or manager of the limited liability company or the receiver or trustee that my name appears above, or on an attachment with all other like empowered.		
SIGNATURE: JOSE DANIEL LORENZO DOMINGUEZ	MR	01/29/2021

LORENZO, JOSE D

3140 W 84TH STREET UNIT.9 HIALEAH, FL 33018 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 :

Authorized Person(s) Detail .			
Title	MGRM	Title	MGRM
Name	LORENZO, JOSE D	Name	LUZARDO, WUILEIMA C
Address	13506 SUMMERPORT VILLAGE PKWY #263	Address	13506 SUMMERPORT VILLAGE PKWY #263
City-State-Zip:	WINDERMERE FL 34786	City-State-Zip:	WINDERMERE FL 34786

13506 SUMMERPORT VILLAGE PKWY

Current Mailing Address:

FEI Number: 46-2185120

Name and Address of Current Registered Agent:

3140 W 84TH STREET UNIT.9

HIALEAH, FL 33018 US

DOCUMENT# L13000013710

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: ANDI SOLUTIONS, LLC

Current Principal Place of Business:

#263 WINDERMERE, FL 34786

Certificate of Status Desired: No

Electronic Signature of Signing Authorized Person(s) Detail

Date