

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000121169

**Entity Name:** VOS UTILITY, LLC

**Current Principal Place of Business:**

8530 SW 124 AVE  
SUITE 103-214  
MIAMI, FL 33183

**Current Mailing Address:**

8530 SW 124 ST  
SUITE 103-214  
MIAMI, FL 33183-4632 US

**FEI Number:** 46-3511109

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

RAMIREZ, MICHELLE  
8530 SW 124 AVE  
SUITE 103-214  
MIAMI, FL 33194 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           MANAGING MEMBER  
Name           RAMIREZ, MICHELLE  
Address        8530 SW 124 ST  
                  SUITE 103-214  
City-State-Zip: MIAMI FL 33183-4632

Title           MANAGING MEMBER  
Name           RAMIREZ, RUBEN JR.  
Address        8530 SW 124 ST  
                  SUITE 103-214  
City-State-Zip: MIAMI FL 33183-4632

*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:** MICHELLE RAMIREZ

**MANAGER**

**03/15/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date