		01/20/2015		
that my name appears above, or on an attachment with all other like empowered.				
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				
I hereby certify that the information indicated on this report or supplemental report	ort is true and accurate and that my electronic signature shall have the same le	egal effect as if made under		

SIGNATURE	PATRICK	GUIMEZ	

OWNER

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L14000052208

Entity Name: LOST CHILD'S CONSULTING & ENTERTAINMENT LLC

Current Principal Place of Business:

1609 DEWEY STREET HOLLYWOOD, FL 33020

Current Mailing Address:

1609 DEWEY STREET HOLLYWOOD, FL 33020

FEI Number: 46-5247835

Name and Address of Current Registered Agent:

PATRICK VIVIES CPA PA 700 E DANIA BEACH BLVD SUITE 202 DANIA, FL 33004 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	GUIMEZ, PATRICK	Name	CORTES GUTIERREZ, ALBA	
Address	1609 DEWEY STREET	Address	1609 DEWEY STREET	
City-State-Zip:	HOLLYWOOD FL 33020	City-State-Zip:	HOLLYWOOD FL 33020	

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 29, 2015 Secretary of State CC1343563177

Date

Certificate of Status Desired: Yes

Date