#### 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. 03/22/2017 MGR

## SIGNATURE: ARIEL CAMBAS

Electronic Signature of Signing Authorized Person(s) Detail

# 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

### DOCUMENT# L14000058782

Entity Name: 365 IT CONSULTING LLC

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

185 NW 13TH AVE 139 MIAMI, FL 33125

#### **Current Mailing Address:**

185 NW 13TH AVE 139 MIAMI, FL 33125 US

#### FEI Number: 46-5349836

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

DIAZ, KAREL 185 NW 13TH AVE 139 MIAMI, FL 33125 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	MGR	Title	MGR
Name	DIAZ, KAREL	Name	CAMBAS, ARIEL A
Address	185 NW 13TH AVE APT. 139	Address	420 E 1ST AVE APT. B112
City-State-Zip:	MIAMI FL 33125	City-State-Zip:	HIALEAH FL 33010

FILED Mar 22, 2017 Secretary of State CC7549597286

Certificate of Status Desired: Yes

Date

Date