

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000060328

Entity Name: GELIN MASTERS CONSULTING SERVICES LLC

Current Principal Place of Business:

6919 W BROWARD BLVD., #196
PLANTATION, FL 33317

Current Mailing Address:

6919 W BROWARD BLVD., #196
PLANTATION, FL 33317 US

FEI Number: 46-5369506

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GELIN, GISELE
4762 NW 1ST STREET
PLANTATION, FL 33317 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	MGR	Title	MGR
Name	GELIN, GISELE	Name	GELIN, SAUL G
Address	4762 NW 1ST STREET	Address	4762 NW 1ST STREET
City-State-Zip:	PLANTATION FL 33317	City-State-Zip:	PLANTATION FL 33317

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: GISELE GELIN

MGR

04/30/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date