

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000128461

Entity Name: FLOVAL LLC

Current Principal Place of Business:

8151 NW 107 CT
DORAL, FL 33178

Current Mailing Address:

8151 NW 107 CT
DORAL, FL 33178 US

FEI Number: 47-1658417

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLORES, MANUEL E
8151 NW 107 CT
DORAL, FL 33178 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: MANUEL E FLORES

04/15/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name VALDERRAMA, MARIA A
Address 8151 NW 107 CT
City-State-Zip: DORAL FL 33178

Title MGRM
Name FLORES, MANUEL E
Address 8151 NW 107 CT
City-State-Zip: DORAL FL 33178

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: MANUEL FLORES

MGMR

04/15/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date