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.

MGR

SIGNATURE: LIDIA P BUSSIERE

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L14000143650

Entity Name: C.BO PROJECTS, LLC.

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

5101 NW 79 AVE # 11 DORAL, FL 33166

### **Current Mailing Address:**

5101 NW 79 AVE # 11 DORAL, FL 33166 US

# FEI Number: 47-1841767

## Name and Address of Current Registered Agent:

BUSSIERE, LIDIA 5101 NW 79 AVE #11 DORAL, FL 33166 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	VP
Name	BUSSIERE, LIDIA	Name	CARMEN, L BOLIVAR
Address	5101 NW 79 AVE # 11	Address	5101 NW 79 AVE # 11
City-State-Zip:	DORAL FL 33166	City-State-Zip:	DORAL FL 33166

FILED Mar 11, 2020 Secretary of State 0522524987CC

Certificate of Status Desired: No

03/11/2020 Date

Date