

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000162177

**Entity Name:** APPLIANCE PARTS SOLUTIONS LLC

**Current Principal Place of Business:**

5252 NW 85TH AV  
APT 1607  
DORAL, FL 33166

**Current Mailing Address:**

PO BOX 228051  
MIAMI, FL 33222 US

**FEI Number:** 47-2379441

**Certificate of Status Desired:** No

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

CATHCART, JOHN ERIC  
5252 NW 85TH AV  
APT 1607  
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:** JOHN E CATHCART

03/02/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title OPERATIONS MANAGER

Name ALAYON, IVAN

Address 14150 SW 84 ST  
BUILDING I APT 110

City-State-Zip: MIAMI FL 33183

Title VICE MANAGER

Name BARRIGA, JORGE

Address 5252 NW 85TH AV  
APT 1607

City-State-Zip: DORAL FL 33166

*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:** IVAN ALAYON

OPERATIONS MANAGER

03/02/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date