

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000178800

**Entity Name:** COMPLETE DEALER SOLUTIONS, LLC.

**Current Principal Place of Business:**

1918 HARRISION ST  
SUITE #202  
HOLLYWOOD, FL 33020

**Current Mailing Address:**

1918 HARRISION ST  
SUITE #202  
HOLLYWOOD, FL 33020

**FEI Number:** 47-2369118

**Certificate of Status Desired:** No

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

MULTI BUSINESS CENTER, CORP  
8051 W 24TH AVENUE  
#8  
HIALEAH, FL 33016 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	DIAZ, MICHEL	Name	DIAZ, MARCOS GABRIEL
Address	1918 HARRISION ST	Address	1918 HARRISION ST
City-State-Zip:	HOLLYWOOD FL 33020	City-State-Zip:	HOLLYWOOD FL 33020

*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:** MICHEL DIAZ

MGR

04/30/2016

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date