### 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000058955

Entity Name: CLIENT REGIONAL SERVICES, LLC

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

7606 DRAGON FLY LOOP GIBSONTON, FL 33534

### **Current Mailing Address:**

**PO BOX 634** GIBSONTON, FL 33534

## **FEI Number: APPLIED FOR**

### Name and Address of Current Registered Agent:

COHEN, MOISES 7606 DRAGON FLY LOOP GIBSONTON, FL 33534 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 Name COHEN, MOISES Address 7606 DRAGON FLY LOOP City-State-Zip: GIBSONTON FL 33534

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: MOISES COHEN

MANAGER

04/25/2016

Electronic Signature of Signing Authorized Person(s) Detail

#### Certificate of Status Desired: No

Date

# FILED Apr 25, 2016 Secretary of State CC0693510418

Date