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.

Current Principal Place of Business:

Entity Name: SERVICE SOLUTIONS USA LLC

11419 NW 122 STREET MEDLEY, FL 33178 US

11419 NW 122 STREET MEDLEY, FL 33178

DOCUMENT# L16000030476

FEI Number: 81-1541894

Name and Address of Current Registered Agent:

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

RUBIO, DIANA M 11419 NW 122 STREET MEDLEY, 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	: DIANA RUBIO			02/26/2024	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	GENERAL MGR	Title	OPERATIONAL MGR		
Name	RUBIO, DIANA M	Name	MESA, HECTOR ALFONSO		
Address	11419 NW 122 STREET	Address	11419 NW 122 STREET		
City-State-Zip:	MEDLEY FL 33178	City-State-Zip:	MEDLEY FL 33178		

SIGNATURE: DIANA RUBIO

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

MANAGER

02/26/2024

Date