

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000039272

Entity Name: TIFFANY BIRTH SERVICES, LLC

Current Principal Place of Business:

3802 S.W. KAKOPO ST.
PORT ST. LUCIE, FL 34953

Current Mailing Address:

3802 S.W. KAKOPO ST.
PORT ST. LUCIE, FL 34953 US

FEI Number: 81-1610230

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REYES, TIFFANY
3802 S.W. KAKOPO ST.
PORT ST. LUCIE, FL 34953 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 MGRM
Name REYES, TIFFANY
Address 3802 S.W. KAKOPO ST.
City-State-Zip: PORT ST. LUCIE FL 34953

Title MGR
Name REYES, TIFFANY
Address 3802 S.W. KAKOPO ST.
City-State-Zip: PORT ST. LUCIE FL 34953

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: TIFFANY REYES

REGISTERED AGENT

05/01/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date