

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000086390

**FILED  
Apr 03, 2019  
Secretary of State  
1260674701CC**

**Entity Name:** VESPARCE SOLUTIONS OF "FLORIDA, LLC"

**Current Principal Place of Business:**

543 MERIDIAN AVENUE  
APT. #3  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

543 MERIDIAN AVENUE  
APT. #3  
MIAMI BEACH, FL 33139 US

**FEI Number:** 81-2480371

**Certificate of Status Desired:** No

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

ARCE, PEDRO  
543 MERIDIAN AVENUE  
APT. #3  
MIAMI BEACH, FL 33139 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            AMBR  
Name            ARCE, PEDRO  
Address        543 MERIDIAN AVENUE  
                  APT. #3  
City-State-Zip: MIAMI BEACH FL 33139

Title            AMBR  
Name            VESPASIANO, ADILSON R.  
Address        543 MERIDIAN AVENUE  
                  APT. #3  
City-State-Zip: MIAMI BEACH FL 33139

*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:** PEDRO ARCE

**MANAGER**

**04/03/2019**

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

\_\_\_\_\_  
Date