

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000105383

**Entity Name:** WORKING AT MY BEST L.L.C

**Current Principal Place of Business:**

18740 NW 17TH AVE  
SUITE 2600  
MIAMI, FL 33056

**Current Mailing Address:**

18740 NW 17TH AVE  
SUITE 2600  
MIAMI, FL 33056 US

**FEI Number:** 47-2010154

**Certificate of Status Desired:** No

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

EDWARDS, PRINCESS E  
2500 NW 204TH STREET  
SUITE 200  
MIAMI GARDEB, FL 33056 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, PRESIDENT  
Name EDWARDS, LATISHA E  
Address 18740 NW 17TH AVE  
City-State-Zip: MIAMI GARDEN FL 33056

Title MGR  
Name PALENZUELA, REINALDO  
Address 18740 NW 17THAVE  
City-State-Zip: MIAMI GARDEN FL 33056

Title VP  
Name PALENZUELA, PARIS L  
Address 18740 NW 17TH AVE  
SUITE 2600  
City-State-Zip: MIAMI FL 33056

Title MANAGER  
Name MOORE , JASMINE J  
Address 18740 NW 17TH AVE  
SUITE 2600  
City-State-Zip: MIAMI FL 33056

*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:** LATISHA EDWARDS

**PRESIDENT**

**03/05/2018**

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

\_\_\_\_\_  
Date