

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000018439

**FILED**  
**Jan 22, 2018**  
**Secretary of State**  
**CC5543946865**

**Entity Name:** ZELTEN SERVICES LLC

**Current Principal Place of Business:**

2550 PATRICK STREET  
KISSIMMEE, FL 34741

**Current Mailing Address:**

2550 PATRICK STREET  
KISSIMMEE, FL 34741 US

**FEI Number:** 81-5111420

**Certificate of Status Desired:** Yes

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

ZELEDON, SEBASTIAN  
1450 PLEASANT HILL ROAD  
KISSIMMEE, FL 34746 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 ZELEDON DOMINGUEZ, SEBASTIAN  
Address 1450 PLEASANT HILL ROAD  
City-State-Zip: KISSIMMEE FL 34746

Title AMBR  
Name ZELEDON DOMINGUEZ, CARLOS A  
Address 4837 ASHURST STREE  
City-State-Zip: KISSIMMEE FL 34758

Title MGR  
Name ZELEDON, JUAN SEBASTIAN  
Address 2550 PATRICK STREET  
City-State-Zip: KISSIMMEE FL 34741

*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:** SEBASTIAN ZELEDON DOMINGUEZ

AMBR

01/22/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date