

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000067611

**Entity Name:** FALCON POOL SERVICES BY LOFI LLC

**Current Principal Place of Business:**

320 S FLAMINGO RD SUITE 343  
PEMBROKE PINES, FL 33027

**Current Mailing Address:**

320 S FLAMINGO RD SUITE 343  
PEMBROKE PINES, FL 33027 US

**FEI Number:** 82-0944900

**Certificate of Status Desired:** No

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

CLFC AND ASSOCIATES LLC  
8200 NW 41 STREET SUITE 200  
DORAL, FL 33166 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	Title	MGR
Name	FILLOL, ELIZABETH	Name	LODI, GIANNA
Address	320 S FLAMINGO RD SUITE 343	Address	320 S FLAMINGO RD SUITE 343
City-State-Zip:	PEMBROKE PINES FL 33027	City-State-Zip:	PEMBROKE PINES FL 33027

*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:** ELIZABETH FILLOL

**MGR**

**04/11/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date