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.

MGR

SIGNATURE: MARLENE BELLO

Electronic Signature of Signing Authorized Person(s) Detail

3104 N ARMENIA AVE TAMPA, FL 33607

Entity Name: INMIGRACION Y CIUDADANIA DOCUMENT PREPARER

Current Mailing Address:

DOCUMENT# L17000142128

Current Principal Place of Business:

SERVICES LLC

#2

3104 N ARMENIA AVE #2 TAMPA, FL 33607

FEI Number: 82-2051888

Name and Address of Current Registered Agent:

BELLO, MARLENE M 3104 N ARMENIA AVE #2 TAMPA, FL 33607 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

Authorized Person(s) Detail :

Title MGR **BELLO, MARLENE** Name Address 3104 N ARMENIA AVE #2 City-State-Zip: TAMPA FL 33607

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 05, 2024 Secretary of State 4027734983CC

Certificate of Status Desired: No

Date

02/05/2024