## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000181286

Entity Name: MASTER SERVICE INTL LLC

## Current Principal Place of Business:

7837 VENTURE CENTER WAY 5304 BOYNTON BEACH, FL 33437

# **Current Mailing Address:**

7837 VENTURE CENTER WAY 5304 BOYNTON BEACH, FL 33437 US

## FEI Number: 82-2586138

## Name and Address of Current Registered Agent:

BECERRA, JOHANA A 7837 VENTURE CENTER WAY 5304 BOYNTON BEACH, FL 33437 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 :

City-State-Zip: BOGOTA D.C. 4772

| Authonized Person(s) Detail : |   |                 |                   |
|-------------------------------|---|-----------------|-------------------|
| Title                         | AMBR                                      | Title           | AUTHORIZED MEMBER |
| Name                          | BECERRA, JOHANA A                         | Name            | BECERRA, ALONSO   |
| Address                       | 7837 VENTURE CENTER WAY                   | Address         | CR 69 # 63 F 14   |
| City-State-Zip:               | 5304<br>BOYNTON BEACH FL 33437            | City-State-Zip: | BOGOTA D.C. 4772  |
| Title<br>Name                 | AUTHORIZED MEMBER<br>URREA, CESAR AUGUSTO |                 |                   |
| Address                       | CR 69 # 63 F 14                           |                 |                   |

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: JOHANA BECERRA

AMBR

09/17/2018

Date

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: Yes

Date