

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000156199

**Entity Name:** HANDSHAKES QUALITY SERVICES, LLC

**Current Principal Place of Business:**

2741 CULLENS COURT  
OCOEE, FL 34761

**Current Mailing Address:**

2741 CULLENS COURT  
OCOEE, FL 34761 US

**FEI Number: 35-2633179**

**Certificate of Status Desired: No**

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

DE FREITAS ALMEIDA, ANDERSON CARLOS  
2741 CULLENS COURT  
OCOEE, FL 34761 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  
Name DE FREITAS ALMEIDA, ANDERSON CARLOS  
Address 2741 CULLENS COURT  
City-State-Zip: OCOEE FL 34761

Title MGR  
Name FRANCISCA DE OLIVEIRA, SIRLANE  
Address 2741 CULLENS COURT  
City-State-Zip: OCOEE FL 34761

*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: ANDERSON CARLOS DE FREITAS ALMEIDA**

**MGR**

**06/29/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date