

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000166812

**Entity Name:** MASTER CAR SOLUTIONS LLC

**Current Principal Place of Business:**

4540 WEST COLONIAL DR  
SUITE B  
ORLANDO, FL 32808

**Current Mailing Address:**

4540 WEST COLONIAL DR  
SUITE B  
ORLANDO, FL 32808 UN

**FEI Number:** 83-1857501

**Certificate of Status Desired:** No

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

GALVAO VIEIRA, ADRIANA  
4540 WEST COLONIAL DR  
SUITE B  
ORLANDO, FL 32808 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 GALVAO VIEIRA, ADRIANA  
Address 4540 W COLONIAL DRIVE SUITE B  
City-State-Zip: ORLANDO FL 32808

Title AMBR  
Name DA SILVA, MARCIO J  
Address 4540 WEST COLONIAL DRIVE  
SUITE B  
City-State-Zip: ORLANDO FL 32808

*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:** ADRIANA GALVAO VIEIRA

AMBR

04/29/2019

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date