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. MEMBER

SIGNATURE: LEUMAN ZAMBRANO CARDENAS

Electronic Signature of Signing Authorized Person(s) Detail

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000188075

Entity Name: SMART SERVICE SOLUTIONS, LLC

Current Principal Place of Business:

8110 SW 73RD AVE SUITE 5 MIAMI, FL 33143

Current Mailing Address:

8110 SW 73RD AVE SUITE 5 MIAMI, FL 33143 US

FEI Number: 35-2636230

Name and Address of Current Registered Agent:

TRO, RODOLFO O 3105 NW 107TH AVE SUITE 400 DORAL, FL 33172 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 :

Authorized Ferson(s) Detail .			
Title	AMBR	Title	AMBR
Name	ZAMBRANO CARDENAS, LEUMAN	Name	HERNANDEZ MACHADO, BELKIS B
Address	8110 SW 73RD AVE SUITE 5	Address	8110 SW 73RD AVE SUITE 5
City-State-Zip:	MIAMI FL 33143	City-State-Zip:	MIAMI FL 33143
Title	MGR		
Name	HERNANDEZ, VANESSA		
Address	8110 SW 73RD AVE SUITE 5		
City-State-Zip:	MIAMI FL 33143		

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

Certificate of Status Desired: No

04/13/2021

Date

FILED Apr 13, 2021 Secretary of State 0316210777CC

Date