

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000257680

**Entity Name:** KASOLUTION, LLC

**Current Principal Place of Business:**

11403 CITRA CIR  
APT 103  
WINDERMERE, FL, FL 34786

**Current Mailing Address:**

11403 CITRA CIR  
APT 103  
WINDERMERE, FL, FL 34786 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

MELO DE BARRIOS, KATTY  
11403 CITRA CIR  
APT 103  
WINDERMERE, FL, FL 34786 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 MELO DE BARRIOS, KATTY  
Address 11403 CITRA CIR  
APT 103  
City-State-Zip: WINDERMERE, FL FL 34786

Title MGR  
Name BARRIOS M, ALBERTO J  
Address 11403 CITRA CIR  
APT 103  
City-State-Zip: WINDERMERE, FL FL 34786

*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:** KATTY MELO DE BARRIOS

**MGR**

**01/22/2020**

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

\_\_\_\_\_  
Date