

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000263862

Entity Name: SOLUTION PLUS MANAGEMENT LLC

Current Principal Place of Business:

597 EAST SAMPLE RD
SUITE B
POMPANO BEACH, FL 33064

Current Mailing Address:

597 EAST SAMPLE RD
SUITE B
POMPANO BEACH, FL 33064

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CADET, JACQUANNE
11270 NW 52 ST
CORAL SPRINGS, FL 33076 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 PRES
Name CADET, JACQUANNE
Address 11270 NW 52ST
City-State-Zip: CORAL SPRINGS FL 33076

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: JACQUANNE CADET

PRESIDENT

01/07/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date