

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000194485

**Entity Name:** MASTER SOLUTIONS 58 LLC

**Current Principal Place of Business:**

5330 NW 114TH AVE  
101  
DORAL, FL 33178

**Current Mailing Address:**

5330 NW 114TH AVE  
101  
DORAL, FL 33178 US

**FEI Number:** 84-2660154

**Certificate of Status Desired:** No

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

SPIEGEL & UTRERA, P.A.  
1840 SOUTHWEST 22ND STREET, 4TH FLOOR  
MIAMI, FL 33145 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 CHACON SAAVEDRA, DICKSON  
Address 5330 NW 114TH AVE  
101  
City-State-Zip: DORAL FL 33178

Title VMGR  
Name CHACON SAAVEDRA, JEASON  
Address 5330 NW 114TH AVE  
101  
City-State-Zip: DORAL FL 33178

Title S  
Name LURIMAR RAMIREZ ROMAN, MARIANI  
Address 5330 NW 114TH AVE  
101  
City-State-Zip: DORAL FL 33178

*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:** DICKSON CHACON SAAVEDRA

MGR

03/11/2020

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

\_\_\_\_\_  
Date