

**2022 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L20000084187

**Entity Name:** LIVIAN SERVICES, LLC**Current Principal Place of Business:**5350 DIPLOMAT CT  
# 107  
KISSIMMEE, FL 34746**Current Mailing Address:**5350 DIPLOMAT CT  
# 107  
KISSIMMEE, FL 34746 US**FEI Number:** 85-0490203**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DE SOUZA GONCALVES, LILIAN  
5350 DIPLOMAT CT  
# 107  
KISSIMMEE, FL 34746 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:** LILIAN DE SOUZA GONCALVES

03/07/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	AMBR
Name	DE SOUZA GONCALVES, LILIAN
Address	5350 DIPLOMAT CT # 107
City-State-Zip:	KISSIMMEE FL 34746
Title	AMBR
Name	DE SOUZA GONCALVES, ANA MARIA
Address	5350 DIPLOMAT CT # 107
City-State-Zip:	KISSIMMEE FL 34746

Title	AMBR
Name	DIAS GONCALVES, VINICIUS
Address	5350 DIPLOMAT CT # 107
City-State-Zip:	KISSIMMEE FL 34746

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:** LILIAN DE SOUZA GONCALVES

AMBR

03/07/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date