

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000185155

**Entity Name:** FS SOLUTIONS SERVICES, LLC

**Current Principal Place of Business:**

2734 NW 8TH ST  
FORT LAUDERDALE, FL 33311

**Current Mailing Address:**

2734 NW 8TH ST  
FORT LAUDERDALE, FL 33311 US

**FEI Number:** 85-1889815

**Certificate of Status Desired:** No

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

ST MARTIN, FRANTZCEAU  
2734 NW 8TH ST  
FORT LAUDERDALE, FL 33311 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 ST MARTIN, FRANTZCEAU  
Address 2734 NW 8TH ST  
City-State-Zip: FORT LAUDERDALE FL 33311

Title AUTHORIZED MEMBER  
Name ST MARTIN , MIRLENE  
Address 2734 NW 8TH ST  
City-State-Zip: FORT LAUDERDALE FL 33311

Title AUTHORIZED MEMBER  
Name ST MARTIN, MIRLENE  
Address 2734 NW 8TH ST  
City-State-Zip: FORT LAUDERDALE FL 33311

*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:** FRANTZCEAU ST MARTIN

MANAGER

03/01/2023

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

\_\_\_\_\_  
Date