

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000283701

**Entity Name:** CENTRAL OF SOLUTIONS LLC

**Current Principal Place of Business:**

3625 NW 82 AVE STE 100-CC  
DORAL, FL 33166

**Current Mailing Address:**

3625 NW 82 AVE STE 100-CC  
DORAL, FL 33166

**FEI Number:** 87-1188611

**Certificate of Status Desired:** No

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

RONALDO A LEON MEDINA  
1401 SW 67TH AVE APT 10  
MIAMI, FL 33144 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	AMBR	Title	MGR
Name	MONICA B ACEVEDO PENALOZA	Name	RONALDO A LEON MEDINA
Address	1401 SW 67TH AVE APT 10	Address	1401 SW 67TH AVE APT 10
City-State-Zip:	MIAMI FL 33144	City-State-Zip:	MIAMI FL 33144

*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:** RONALDO A LEON MEDINA

AMBR

04/29/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date