

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000312262

Entity Name: FLS RISK CONSULTANT & SECURITY MANAGEMENT, LLC

Current Principal Place of Business:

1600 NE 1ST AVE APT 2902
MIAMI, FL 33132

Current Mailing Address:

1600 NE 1ST AVE APT 2902
MIAMI, FL 33132 US

FEI Number: 87-1760932

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRUZUAL TERAN, ELIAS
2813 KINSINGTON CIR
WESTON, FL 33332 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 AUTHORIZED MEMBER
Name LOPEZ SISCO, HENRY
Address 1600 NE 1ST AVE APT 2902
City-State-Zip: MIAMI FL 33132

Title AUTHORIZED MEMBER
Name FERNANDEZ, HERNAN ANTONIO
Address 1600 NE 1ST AVE APT 2902
City-State-Zip: MIAMI FL 33132

Title AUTHORIZED MEMBER
Name SIMONOVIS, IVAN
Address 1600 NE 1ST AVE APT 2902
City-State-Zip: MIAMI FL 33132

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: IVAN SIMONOVIS

AUTHORIZED MEMBER

02/19/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date