

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000411098

**Entity Name:** TWOC SERVICES LLC

**Current Principal Place of Business:**

110 BONAVENTURE BLVD  
BUILDING 1, APT 108  
WESTON, FL 33326

**Current Mailing Address:**

110 BONAVENTURE BLVD  
BUILDING 1, APT 108  
WESTON, FL 33326 US

**FEI Number:** 92-0437864

**Certificate of Status Desired:** No

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

SOPHOS CONSULTING GROUP CORP  
6303 BLUE LAGOON DRIVE  
STE 400  
MIAMI, FL 33126 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	AMBR
Name	COBO MORIN, JOSE T	Name	CAPE CISNEROS, PATRICIA M
Address	110 BONAVENTURE BLVD, BUILDING 1, APT 108	Address	110 BONAVENTURE BLVD, BUILDING 1, APT 108
City-State-Zip:	WESTON FL 33326	City-State-Zip:	WESTON FL 33326

*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:** COBO MORIN JOSE T

AMBR

04/20/2023

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

\_\_\_\_\_  
Date