

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000142125

Entity Name: ALL INTEGRAL SOLUTIONS LLC

Current Principal Place of Business:

1500 TILESTON RD
STE 202
SAINT CLOUD, FL 34771

FILED
Mar 07, 2024
Secretary of State
7880457222CC

Current Mailing Address:

1500 TILESTON RD
STE 202
SAINT CLOUD, FL 34771 US

FEI Number: APPLIED FOR

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ADV ACCOUNTING & TAX SERVICES LLC
12701 S JOHN YOUNG PKWY, STE 215
ORLANDO, FL 32837 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 MBR
Name HERRERA UZCATEGUI, AULI JOSE
Address CALLE 72 AVE 2B URBANIZACION VIRGINIA
City-State-Zip: MARACAIBO, VENEZUELA OC

Title MBR
Name DARGHAM ROMAN, FOSSI
Address CALLE 21 SECTOR URDANETA TAMARE LAGUNILLAS
City-State-Zip: ZULIA, VENEZUELA AL

Title MBR
Name GARCIA MARTINEZ, SERGIO JESUS
Address VIA BOCONO KM 1 320 LN 16 MZ B CA 16
City-State-Zip: VILLA DEL ROSARIO, NORTE DE

Title SALC
Name EDO ROJAS, OSCAR EDUARDO
Address CARRERA 48 26-85 TORRE NORTE PISO 1
City-State-Zip: VILLA DE ROSARIO, NORTE DE

Title MBR
Name MEDINA DORADO, YAN
Address CALLE 8 #9E-80 BARRIO COLSAG APT 701
City-State-Zip: CUCUA, NORTE DE SANTANDER

Title MBR
Name MARQUEZ, ANDRES A
Address 2906 SATIRE ST
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: SERGIO JESUS GARCIA MARTINEZ

MBR

03/07/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date