

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000005677

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Entity Name:** DORA BEST SOLUTIONS, LLC

**Current Principal Place of Business:**

80 LAKE WOOD CIRCLE  
OCALA, FL 34482 US

**New Principal Place of Business:**

**Current Mailing Address:**

80 LAKE WOOD CIRCLE  
OCALA, FL 34482 US

**New Mailing Address:**

**FEI Number:** 27-1696068

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ORTIZ, GEORGE  
1515 E SILVER SPRINGS BLVD.  
SUITE 204  
OCALA, FL 34470 US

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

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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** GREEN, KATHERINE  
**Address:** 80 LAKE WOOD CIRCLE  
**City-St-Zip:** Ocala, FL 34482 US

**Title:** MGRM  
**Name:** BEST DE CANTU, DORA H  
**Address:** 80 LAKE WOOD CIRCLE  
**City-St-Zip:** Ocala, FL 34482 US

I hereby certify that the information indicated on this 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 608, Florida Statutes.

**SIGNATURE:** KATHERINE GREEN

MGRM

04/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date