# 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: LILISBET LUGO

Electronic Signature of Signing Officer/Director Detail

#### DOCUMENT# P18000007120

Entity Name: LML PROFESSIONAL SERVICES INC

### Current Principal Place of Business:

1840 W 49TH ST STE 738 HIALEAH, FL 33012

## **Current Mailing Address:**

6612 W 22ND LN HIALEAH, FL 33016 US

## FEI Number: 82-4127583

## Name and Address of Current Registered Agent:

LUGO, LILISBET 6612 W 22ND LN HIALEAH, FL 33016 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

## Officer/Director Detail :

Title	Ρ	Title	VP
Name	LUGO, LILISBET	Name	MANTILLA, MICHEL
Address	6612 W 22ND LN	Address	6612 W 22ND LN
City-State-Zip:	HIALEAH FL 33016	City-State-Zip:	HIALEAH FL 33016
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FILED Apr 17, 2023 Secretary of State 5605303173CC

Certificate of Status Desired: No

04/17/2023

Date

Date