

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000043528

**Entity Name:** HECTOR RIVAS AIR CONDITIONING LLC

**Current Principal Place of Business:**

10090 SW 159 AVE.  
MIAMI, FL 33196

**Current Mailing Address:**

10090 SW 159 AVE.  
MIAMI, FL 33196

**FEI Number:** 46-2056745

**Certificate of Status Desired:** No

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

RIVAS, HECTOR ESR  
10090 SW 159 AVE  
MIAMI, FL 33196 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 MGR  
Name HECTOR, RIVAS ESR  
Address 10090 SW 159 AVE.  
City-State-Zip: MIAMI FL 33196

*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:** HECTOR E RIVAS

MGR

03/03/2016

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

\_\_\_\_\_  
Date