

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000060710

Entity Name: FIRST ASSISTANT SERVICES, LLC**Current Principal Place of Business:**19538 S WHITEWATER AVE
WESTON, FL 33332**Current Mailing Address:**19538 S WHITEWATER AVE
WESTON, FL 33332 US**FEI Number:** 20-3038539**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MELENDEZ VEGA LLC
10631 N KENDALL DR
SUITE 110
MIAMI, FL 33176 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:** MICHAEL MELENDEZ

04/04/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGING MEMBER
Name VIA Y RADA, NESTOR G
Address 19538 S WHITEWATER AVE
City-State-Zip: WESTON FL 33332

Title MANAGING MEMBER
Name SHARIATI, AMIR MD
Address 19538 S WHITEWATER AVE
City-State-Zip: WESTON FL 33332

Title AUTHORIZED MEMBER
Name VIA Y RADA, NESTOR
Address 19538 S WHITEWATER AVE
City-State-Zip: WESTON FL 33332

Title AUTHORIZED MEMBER
Name VIA Y RADA, DIEGO
Address 19538 S WHITEWATER AVE
City-State-Zip: WESTON FL 33332

Title AUTHORIZED MEMBER
Name ABAD, ELSI P
Address 19538 S WHITEWATER AVE
City-State-Zip: WESTON FL 33332

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: NESTOR VIA Y RADA

MANAGER

04/04/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date