

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000031264

Entity Name: CARLOSR LLC

Current Principal Place of Business:

7760 W 20 AVE
SUITE 8
HIALEAH, FL 33016

Current Mailing Address:

PO BOX 126205
HIALEAH, FL 33012

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAMIREZ, CARLOS
7760 W 20 AVE
SUITE 8
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

_____ Date

Authorized Person(s) Detail :

Title MGR
Name RAMIREZ, CARLOS
Address 7760 W 20 AVE
SUITE 8
City-State-Zip: HIALEAH FL 33016

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: CARLOS RAMIREZ

MANAGER

01/16/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date