

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000065640

Entity Name: HCC SERVICES LLC

Current Principal Place of Business:

7800 SOUTH WEST 57TH AVENUE, STE. 207E
MIAMI, FL 33143

Current Mailing Address:

7800 SOUTH WEST 57TH AVENUE, STE. 207E
MIAMI, FL 33143

FEI Number: 61-1567495

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DE MENDIA, CARLOS F
7800 SOUTH WEST 57TH AVENUE, STE. 207E
MIAMI, FL 33143 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 DE MENDIA, CARLOS F
Address 7800 SOUTH WEST 57TH AVENUE,
STE. 207E
City-State-Zip: MIAMI FL 33143

Title MGRM
Name MENDIA, CARLOS G
Address 14708 GOLDEN LEAF PLACE
City-State-Zip: LOUISVILLE KY 40245

Title MGRM
Name BEAUPERTHUY, CRISTINA M
Address 6464 CABALLERO BLVD.
City-State-Zip: CORAL GABLES FL 33143

Title MGRM
Name MENDIA, IRMA
Address 9250 SW 88TH TERR
City-State-Zip: MIAMI FL 33176

Title MGRM
Name DE MENDIA, IRMA A
Address 1120 S. ALHAMBRA CIRCLE
City-State-Zip: CORAL GABLES FL 33146

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 F DE MENDIA

MGR

01/10/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date