

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000089876

Entity Name: FAP SERVICES LLC

Current Principal Place of Business:

815 PONCE DE LEON BLVD, STE 200
CORAL GABLES, FL 33134

Current Mailing Address:

815 PONCE DE LEON BLVD, STE 200
CORAL GABLES, FL 33134 US

FEI Number: 26-4335806

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PAULY, CLEMENS WESQ
815 PONCE DE LEON BLVD, STE 200
CORAL GABLES, FL 33134 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 MGRM
Name ERMEL, CHRISTIAN
Address 815 PONCE DE LEON BLVD, STE P-201
City-State-Zip: CORAL GABLES FL 33134

Title MGRM
Name HERWIG, PATRICK
Address 815 PONCE DE LEON BLVD, STE P-201
City-State-Zip: CORAL GABLES FL 33134

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHRISTIAN ERMEL

CEO

02/28/2013

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date