# 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.

Ρ

#### SIGNATURE: UVANNE ROSE

Electronic Signature of Signing Authorized Person(s) Detail

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000016920

### Entity Name: UBAR PROPERTY MANAGEMENT SERVICES, LLC

### **Current Principal Place of Business:**

540 NW UNIVERSITY BLVD. 110 PORT SAINT LUCIE, FL 34986

#### **Current Mailing Address:**

540 NW UNIVERSITY BLVD. 110 PORT SAINT LUCIE, FL 34986

#### FEI Number: 46-3352498

## Name and Address of Current Registered Agent:

UBAR REALTY, INC. 540 NW UNIVERSITY BLVD 110 PORT SAINT LUCIE, FL 34986 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

#### Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	ROSE, UVANNE C	Name	ROSE, KARL B
Address	540 NW UNIVERSITY BLVD. 110	Address	5178 NW RUGBY DRIVE
		City-State-Zip:	PORT SAINT LUCIE FL 34983
City-State-Zip:	PORT SAINT LUCIE FL 34986		

Certificate of Status Desired: No

#### FILED Mar 27, 2019 Secretary of State 8016392017CC

03/27/2019 Date

Date