

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000082902

**Entity Name:** SWJ LAB SOLUTIONS, L.L.C

**Current Principal Place of Business:**

1000 BRICKELL AVE  
715 G  
MIAMI, FL 33131

**Current Mailing Address:**

1000 BRICKELL AVE  
715 G  
MIAMI, FL 33131 US

**FEI Number:** 46-2945013

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

COULOUMY, JEAN-PAUL  
10800 NW 88TH TER UNIT # 218  
DORAL, FL 33178 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 WILLIAM, DE LEON M  
Address 11130 NW 77 TERR  
City-State-Zip: DORAL FL 33178

Title MGRM  
Name COULOUMY, JEAN-PAUL  
Address 10800NW 88 TERR UNIT 218  
City-State-Zip: DORAL FL 33178

Title MGRM  
Name GONZALEZ, SILVERIO A  
Address 11012 NW 72 TER  
City-State-Zip: DORAL FL 33178

*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:** WILLIAM DE LEON

**MANAGER**

**04/30/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date