

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000048193

**Entity Name:** MASTER WOOD SERVICES LLC

**Current Principal Place of Business:**

1225 MARSEILLES DR  
19  
MIAMI BEACH, FL 33141

**Current Mailing Address:**

1225 MARSEILLES DR  
19  
MIAMI BEACH, FL 33141

**FEI Number:** 46-5171467

**Certificate of Status Desired:** No

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

CIGANDA, LUIS  
1225 MARSEILLES DR  
19  
MIAMI BEACH, FL 33141 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 CIGANDA , LUIS  
Address 1225 MARSEILLES DRIVE APT 19  
City-State-Zip: MIAMI BEACH FL 33141

*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:** LUIS CIGANDA

MGR

05/05/2015

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

\_\_\_\_\_  
Date