## 2016 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L14000059293

Entity Name: DM TOTAL SOLUTIONS LLC

**Current Principal Place of Business:** 

5951 NW 173RD DR.

SUITE 5

HIALEAH, FL 33015

**Current Mailing Address:** 

5951 NW 173RD DR.

SUITE 5

HIALEAH, FL 33015 US

FEI Number: 81-3164337 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DE LEON, HENRIQUE 18140 NW 59TH AVE.

**APT 101** 

Address

HIALEAH, FL 33015 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: DE LEON HENRIQUE 07/07/2016

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title **MANAGER** Title MANAGER

DE LEON, ENRIQUE Name Name SANTIAGO, BLANCA 18140 NW 59TH AVE.

18140 NW 59TH Address **APT 101 APT 101** 

City-State-Zip: HIALEAH FL 33015 City-State-Zip: HIALEAH FL 33015

Title **AUTHORIZED MEMBER** Title **AUTHORIZED MEMBER** 

Name DE LEON, HENRIQUE JR. Name LEON, ADRYANA

Address 18140 NW 59TH AVE. Address 18140 NW 59TH AVE.

> **APT 101** APT 101

City-State-Zip: HIALEAH FL 33015 City-State-Zip: HIALEAH FL 33015

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: HENRIQUE DE LEON MANAGER 07/07/2016

**FILED** Jul 07, 2016

**Secretary of State** 

CR6720255796