

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000071326

**Entity Name:** INTEGRAL SUPPORT & SOLUTIONS, LLC

**Current Principal Place of Business:**

18778 NW 79 PL  
HIALEAH, FL 33015

**Current Mailing Address:**

18778 NW 79 PL  
HIALEAH, FL 33015 US

**FEI Number:** 46-5558979

**Certificate of Status Desired:** No

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

AGUIRRE, FLOR  
18778 NW 79 PL  
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:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name AGUIRRE, FLOR  
Address 18778 NW 79 PL  
City-State-Zip: HIALEAH FL 33015

Title AMBR  
Name FERNANDEZ, ZAIDE  
Address 18778 NW 79 PL  
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:** FLOR AGUIRRE

AMBR

02/22/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date