### 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: JORGE BARRETO

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER

04/24/2019

Date

## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L14000120493

# Entity Name: ASSOCIATED MANAGEMENT SOLUTIONS, LLC

# **Current Principal Place of Business:**

8140 NW 155 ST STE 202 MIAMI LAKES, FL 33016

## **Current Mailing Address:**

8140 NW 155 ST STE 202 MIAMI LAKES, FL 33016 US

## FEI Number: 81-0700224

## Name and Address of Current Registered Agent:

BARRETO, JORGE 8140 NW 155 ST STE 202 MIAMI LAKES, FL 33016 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	: JORGE BARRETO			04/24/2019
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	MANAGER	
Name	BARRETO, JORGE	Name	BARRETO, MARIA E	
Address	8140 NW 155 ST STE 202	Address	8140 NW 155 STREET 202	
City-State-Zip:	MIAMI LAKES FL 33016	City-State-Zip:	MIAMI FL 33016	

Certificate of Status Desired: No

Apr 24, 2019 Secretary of State 3468224303CC

FILED