

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000054148

**Entity Name:** VERAGUI SOLUTIONS LLC

**Current Principal Place of Business:**

13194 US HWY. 301 S  
SUITE # 106  
RIVERVIEW, FL 33578

**FILED**  
**Mar 30, 2017**  
**Secretary of State**  
**CC7675032005**

**Current Mailing Address:**

13194 US HWY. 301 S  
SUITE # 106  
RIVERVIEW, FL 33578 US

**FEI Number:** 47-3545469

**Certificate of Status Desired:** Yes

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

AGUIRRE AGUILERA, MARJORIE P  
13194 US HWY. 301 S  
SUITE #106  
RIVERVIEW, FL 33578 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 AGUILERA, MARJORIE P  
Address 13194 US HWY. 301 S  
SUITE #106  
City-State-Zip: RIVERVIEW FL 33578

Title AMBR  
Name VERNI AGUIRRE, VALERIA A  
Address 13194 US HWY. 301 S  
SUITE # 106  
City-State-Zip: RIVERVIEW FL 33578

Title MGR  
Name VERNI AGUIRRE, PAOLO J  
Address 13194 US HWY. 301 S  
SUITE # 106  
City-State-Zip: RIVERVIEW FL 33578

*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:** MARJORIE P. AGUIRRE AGUILERA

**PRESIDENT**

**03/30/2017**

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

\_\_\_\_\_  
Date