

**2018 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L15000058955

**Entity Name:** CLIENT REGIONAL SERVICES, LLC

**Current Principal Place of Business:**

7606 DRAGON FLY LOOP  
GIBSONTON, FL 33534

**Current Mailing Address:**

PO BOX 634  
GIBSONTON, FL 33534

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

COHEN, MOISES SR.  
7606 DRAGON FLY LOOP  
GIBSONTON, FL 33534 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:** MOISES COHEN

03/05/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name COHEN, MOISES  
Address 7606 DRAGON FLY LOOP  
City-State-Zip: GIBSONTON FL 33534

*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:** MOISES COHEN

MGR

03/05/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date