

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000128704

Entity Name: ZAIRA LILIANA MELENDEZ, LLC.

Current Principal Place of Business:

241 AFTON SQ.
105
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

P.O. BOX 783893
WINTER GARDEN, FL 34787 US

FEI Number: 47-4659961

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MELENDEZ, ZAIRA L
241 AFTON SQ.
105
ALTAMONTE SPRINGS, FL 32714 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 MGR
Name MELENDEZ, ZAIRA L
Address 241 AFTON SQ.
105
City-State-Zip: ALTAMONTE SPRINGS FL 32714

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: ZAIRA L. MELENDEZ

MGR

04/27/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date