

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000131245

Entity Name: LCSS, LLC

Current Principal Place of Business:

4301 N COOLIDGE AVE
TAMPA, FL 33614

Current Mailing Address:

PO BOX 151036
TAMPA, FL 33684 US

FEI Number: 47-4710265

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CALDERON, MARIA
4301 N COOLIDGE AVE
TAMPA, FL 33614 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 CALDERON, GUADALUPE
Address 4301 N COOLIDGE AVE
City-State-Zip: TAMPA FL 33614

Title MGR
Name CALDERON, MARIA
Address 4301 N COOLIDGE AVE
City-State-Zip: TAMPA FL 33614

Title MGR
Name GONZALES, YONY
Address 4301 N COOLIDGE AVE
City-State-Zip: TAMPA FL 33614

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: MARIA CALDERON

MANAGER

04/30/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date