#### 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000134480

Entity Name: WATER DAMAGE SOLUTION SERVICES, LLC

Jul 22, 2016

**Secretary of State** CC2040762234

**FILED** 

# **Current Principal Place of Business:**

4605 NW 7 ST MIAMI, FL 33126

### **Current Mailing Address:**

4605 NW 7 ST MIAMI. FL 33126

FEI Number: 81-3331131 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

GALVEZ, NAIVYS 4605 NW 7 ST MIAMI, FL 33126 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:

**PRESIDENT** Title Title MANAGER

Name GALVEZ, NAIVYS Name ARANGO, BARBARA Address 12430 SW 217 ST Address 15364 GARFIELD DR

City-State-Zip: HOMEASTEAD FL 33033 City-State-Zip: MIAMI FL 33170

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: NAIVYS M GALVEZ

**PRESIDENT** 

07/22/2016