

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000161739

**Entity Name:** SFL CONSULTING SERVICES LLC

**Current Principal Place of Business:**

2417 WEST 8TH LANE  
HIALEAH, FL 33010

**Current Mailing Address:**

591 WEST 33 PLACE  
HIALEAH, FL 33012 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MOLINA, MICHEL  
591 WEST 33 PLACE  
HIALEAH, FL 33012 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	AUTHORIZED MEMBER	Title	AUTHORIZED REPRESENTATIVE
Name	MOLINA, MICHEL	Name	MOLINA, MADAY
Address	591 WEST 33 PLACE	Address	591 WEST 33 PLACE
City-State-Zip:	HIALEAH FL 33012	City-State-Zip:	HIALEAH FL 33012

*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:** MICHEL MOLINA

AMBR

04/30/2017

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

\_\_\_\_\_  
Date