

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000010370

Entity Name: OUTSTANDING APPAREL, LLC

Current Principal Place of Business:

7957 SW 6TH COURT
NORTH LAUDERDALE, FL 33068

Current Mailing Address:

7957 SW 6TH COURT
NORTH LAUDERDALE, FL 33068 US

FEI Number: 81-5022902

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS COURT, SUITE A
TAMPA, FL 33612-3425 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 AMBR
Name CANET, CARLOS
Address 7957 SW 6TH COURT
City-State-Zip: NORTH LAUDERDALE FL 33068

Title AMBR
Name WASHINGTON, MARCUS
Address 7957 SW 6TH COURT
City-State-Zip: NORTH LAUDERDALE FL 33068

Title AMBR
Name FAHLE, JAHMAL
Address 7957 SW 6TH COURT
City-State-Zip: NORTH LAUDERDALE FL 33068

Title AMBR
Name WALTERS, JOEL
Address 7957 SW 6TH COURT
City-State-Zip: NORTH LAUDERDALE FL 33068

Title MBR
Name PAUL, MYRVENS
Address 7957 SW 6TH COURT
City-State-Zip: NORTH LAUDERDALE FL 33068

Title MBR
Name DAKERS, DEVIN
Address 7957 SW 6TH COURT
City-State-Zip: NORTH LAUDERDALE FL 33068

Title MBR
Name MAISONNEUVE, RICARDO
Address 7957 SW 6TH COURT
City-State-Zip: NORTH LAUDERDALE FL 33068

Title MBR
Name PALACIOS, SALOMON III
Address 7957 SW 6TH COURT
City-State-Zip: NORTH LAUDERDALE FL 33068

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: CARLOS CANET

AMBASSADOR

05/01/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date