I hereby certify that the information indicated on this report or supplemental report is true and accurat	te and that my electronic signature shall have the sam	e legal effect as if made under
oath; that I am a managing member or manager of the limited liability company or the receiver or trus	stee 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 JOSE SILVA	MANAGER	03/29/2018

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:

I

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	GUTIERREZ, UBALDO J	Name	SILVA, JOSE J SR
Address	8980 NW 116 STREET	Address	8980 NW 116 STREET
City-State-Zip:	HIALEAH GARDENS FL 33018	City-State-Zip:	HIALEAH GARDENS FL 33018

HIALEAH GARDENS. FL 33018 US

Current Principal Place of Business:

FEI Number: 82-2376443

HIALEAH GARDENS. FL 33018

Current Mailing Address: 8980 NW 116 STREET

DOCUMENT# L17000166360

8980 NW 116 STREET

Name and Address of Current Registered Agent:

SILVA, JOSE J SR 8980 NW 116 STREET HIALEAH GARDENS, FL 33018 US

Entity Name: PUBLIC HOUSING CONSULTING SERVICES, LLC

FILED Mar 29, 2018 Secretary of State CC5331204448

Certificate of Status Desired: Yes

Date

Date

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER