

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000175591

**Entity Name:** AUGUSTO GENERAL PROFESSIONAL SERVICES LLC

**Current Principal Place of Business:**

4863 HAWKWOOD RD  
#A  
BOYNTON BEACH, FL 33436

**Current Mailing Address:**

4863 HAWKWOOD RD  
#A  
BOYNTON BEACH, FL 33436

**FEI Number:** 82-2601133

**Certificate of Status Desired:** No

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

SENEGAGLIA, JOSE AUGUSTO  
4863 HAWKWOOD RD  
#A  
BOYNTON BEACH, FL 33436 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 SENEGAGLIA, JOSE AUGUSTO  
Address 4863 HAWKWOOD RD #A  
City-State-Zip: BOYNTON BEACH FL 33436

*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:** JOSE AUGUSTO SENEGAGLIA

**MANAGER**

**04/10/2018**

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

\_\_\_\_\_  
Date