## 2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L17000202373

Entity Name: CD CONSULTING GROUP LLC

**Current Principal Place of Business:** 

5113 CEDARLEAF LN ORLANDO, FL 32829

**Current Mailing Address:** 

5113 CEDARLEAF LN ORLANDO, FL 32829 US

FEI Number: 83-4457759 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RIVERA, CHRISTOPHER P 5113 CEDARLEAF LN ORLANDO, FL 32829 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: CHRISTOPHER RIVERA 04/18/2019

Electronic Signature of Registered Agent

Date

**FILED** Apr 18, 2019

**Secretary of State** 

1685363225CR

Authorized Person(s) Detail:

Title MGR Title MGR

RIVERA, CHRISTOPHER P Name Name ACOSTA, DAVID

5113 CEDARLEAF LN 545 LAKE MARTHA DR NE Address Address

City-State-Zip: WINTER HAVEN FL 33881 ORLANDO FL 32829 City-State-Zip:

Title AUTHORIZED MEMBER Title **AUTHORIZED MEMBER** 

Name RIVERA, DANIEL F TORRES FIGUEROA, JORGE H Name

Address 11636 DARLINGTON DR Address 315 GRAND MAGNOLIA AVE APT. 20113

ORLANDO FL 32837 City-State-Zip: CELEBRATION FL 34747

City-State-Zip:

Title **AUTHORIZED MEMBER** 

Name HARRIS, REX A

Address 1434 W COSTILLA ST

COLORADO SPRINGS CO 80905 City-State-Zip:

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: CHRISTOPHER RIVERA **AMBR** 

Electronic Signature of Signing Authorized Person(s) Detail

04/18/2019 Date