

**2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L18000037740

**Entity Name:** CHARLES'S FAMILY SERVICES LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

8403 PINES BLVD  
#168  
PEMBROKE PINES, FL 33024

**Current Mailing Address:**

8403 PINES BLVD  
#168  
PEMBROKE PINES, FL 33024 US

**FEI Number:** 82-4830779

**Certificate of Status Desired:** No

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

INGINAC, CATHY E  
8403 PINES BLVD  
#168  
PEMBROKE PINES, FL 33024 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:** CATHY E INGINAC

11/05/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name CHARLES, PIERRE MARY C  
Address 8403 PINES BLVD #168  
City-State-Zip: PEMBROKE PINES FL 33024

Title AMBR  
Name INGINAC, CATHY E  
Address 8403 PINES BLVD #168  
City-State-Zip: PEMBROKE PINES FL 33024

Title AP  
Name CHARLES, MARKELLY S  
Address 8403 PINES BLVD #168  
City-State-Zip: PEMBROKE PINES FL 33024

*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:** PIERREMARY CHARLES

MGR

11/05/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date