

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000092956

Entity Name: VENESERVICIOS LLC

Current Principal Place of Business:

7200 NW 114TH AVE
APT 209
DORAL, FL 33178

Current Mailing Address:

7200 NW 114TH AVE
APT 209
DORAL, FL 33178 US

FEI Number: 82-5216013

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CECCARELLI, MARIA A
7200 NW 114TH AVE
APT 209
DORAL, FL 33178 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 CECCARELLI, MARIA A
Address 7200 NW 114TH AVE
APT 209
City-State-Zip: DORAL FL 33178

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: CECCARELLI , MARIA A

AMBR

04/19/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date