

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000183668

**Entity Name:** CAMILO I SERVICES LLC

**Current Principal Place of Business:**

513 LEMON ST  
AUBURNDALE, FL 33823

**Current Mailing Address:**

513 LEMON ST  
AUBURNDALE, FL 33823 US

**FEI Number:** 35-2635680

**Certificate of Status Desired:** No

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

IBAR- SANCHEZ, CAMILO  
513 LEMON ST  
AUBURNDALE, FL 33823 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	MBR	Title	MBR
Name	IBAR -SANCHEZ, CAMILO	Name	IBAR-SANCHEZ, MISAEL
Address	513 LEMON ST	Address	602 PINE ST
City-State-Zip:	AUBURNDALE FL 33823	City-State-Zip:	AUBURNDALE FL 33823

*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:** CAMILO IBAR-SANCHEZ

MEMBER

04/29/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date