

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000188075

Entity Name: SMART SERVICE SOLUTIONS, LLC

Current Principal Place of Business:

8400 NW 36TH ST.
SUITE 450
DORAL, FL 33166

Current Mailing Address:

8400 NW 36TH ST.
SUITE 450
DORAL, FL 33166 US

FEI Number: 35-2636230

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRO, RODOLFO O
14242 SW 14TH ST
MIAMI, FL 33184 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	ZAMBRANO CARDENAS, LEUMAN
Address	8400 NW 36TH ST. SUITE 450
City-State-Zip:	DORAL FL 33166

Title	AMBR
Name	HERNANDEZ MACHADO, BELKIS B
Address	8400 NW 36TH ST. SUITE 450
City-State-Zip:	DORAL FL 33166

Title	MGR
Name	GAMERO, ROSSANA
Address	8400 NW 36TH ST. SUITE 450
City-State-Zip:	DORAL FL 33166

Title	MGR
Name	HERNANDEZ, VANESSA
Address	8400 NW 36TH ST. SUITE 450
City-State-Zip:	DORAL FL 33166

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: ZAMBRANO CARDENAS , LEUMAN

AUTHORIZED MEMBER

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date