

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000263216

**Entity Name:** 2LG CARRIERS AND SERVICES LLC**Current Principal Place of Business:**7411 NW 54TH STREET  
MIAMI, FL 33166**Current Mailing Address:**7411 NW 54TH STREET  
MIAMI, FL 33166 US**FEI Number:** 84-3613493**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DEL VALLE BERRIOS, GORETTY  
7411 NW 54TH STREET  
MIAMI, FL 33166 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:** GORETTY DEL VALLE BERRIOS

04/30/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                                 |
|-----------------|---------------------------------|
| Title           | MGR                             |
| Name            | BERRIOS TRUJILLO, LINDA CRISTAL |
| Address         | 6202 NW 116TH AVENUE, UNIT 449  |
| City-State-Zip: | DORAL FL 33178                  |

|                 |                            |
|-----------------|----------------------------|
| Title           | MGR                        |
| Name            | DEL VALLE BERRIOS, GORETTY |
| Address         | 8290 LAKE DR., APT 117     |
| City-State-Zip: | DORAL FL 33166             |

|                 |                                       |
|-----------------|---------------------------------------|
| Title           | MGR                                   |
| Name            | DEL CARMEN FAJARDO DE CRUZ,<br>LIHELY |
| Address         | 10255 NW 63RD TERRACE, APT 104        |
| 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:** GORETTY DEL VALLE BERRIOS

MGR

04/30/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date