

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M11000000006

**Entity Name:** UASSIST.ME LLC

**Current Principal Place of Business:**

1688 MERIDIAN AVENUE  
SUITE 600  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

1688 MERIDIAN AVENUE  
SUITE 600  
MIAMI BEACH, FL 33139 US

**FEI Number:** 33-1219622

**Certificate of Status Desired:** No

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

INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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           | MGRM                               | Title           | MGRM                               |
| Name            | ATANACIO, ALFREDO                  | Name            | SCHILDKNECHT, RODOLFO              |
| Address         | PASEO GENERAL ESCALON #5454        | Address         | PASEO GENERAL ESCALON #5454        |
| City-State-Zip: | SAN SALVADOR SAN SALVADOR<br>00000 | City-State-Zip: | SAN SALVADOR SAN SALVADOR<br>00000 |
|                 |                                    |                 |                                    |
| Title           | MGRM                               |                 |                                    |
| Name            | DE SOLA, DIEGO                     |                 |                                    |
| Address         | 1688 MERIDIAN AVENUE<br>SUITE 600  |                 |                                    |
| City-State-Zip: | MIAMI BEACH FL 33139               |                 |                                    |

*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:** ALFREDO ATANACIO CADER

**FOUNDER**

**02/16/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date