

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000348611

**Entity Name:** CFB PROFESSIONAL SERVICES, LLC

**Current Principal Place of Business:**

221 SW PALM DR, APT. #105  
PORT ST LUCIE, FL 34986

**Current Mailing Address:**

221 SW PALM DR, APT. #105  
PORT ST LUCIE, FL 34986 US

**FEI Number: 88-3677209**

**Certificate of Status Desired: No**

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

TAXPEOPLE, LLC  
2855 SW BRIGHTON ST  
PORT ST LUCIE, FL 34953 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 YURIDIA BIVIANA CALDERON MAHECHA  
Address 221 SW PALM DR APT. 105  
City-State-Zip: PORT ST LUCIE FL 34986

Title AMBR  
Name VIDALES BARRIOS, FERNEY ERNESTO  
Address 221 SW PALM DR APT. 105  
City-State-Zip: PORT ST LUCIE FL 34986

*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:** YURIDIA BIVIANA CALDERON MAHECHA

AMBR

01/24/2023

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date