DOCUMENT# P11000082440

Entity Name: B TOTAL LAWN CARE, INC.

### **Current Principal Place of Business:**

2040 HOLLY HAMMOCK RD DELEON SPRINGS, FL 32130

## **Current Mailing Address:**

PO BOX 1214 DELEON SPRINGS, FL 32130

## FEI Number: 90-0998183

### Name and Address of Current Registered Agent:

MCKENZIE, CHARLENE H 2030 HOLLY HAMMOCK RD DELEON SPRINGS, FL 32130 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

## Officer/Director Detail :

Title	PVT	Title	S
Name	GOEBEL, BRIAN B	Name	GOEBEL, BRIAN B
Address	PO BOX 1214	Address	PO BOX 1214
City-State-Zip:	DELEON SPRINGS FL 32130	City-State-Zip:	DELEON SPRINGS FL 32130

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRIAN B. GOEBEL

PRESIDENT

04/27/2017 Date

Electronic Signature of Signing Officer/Director Detail



Date

# FILED Apr 27, 2017 Secretary of State CC7721830747

Certificate of Status Desired: No