

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000002689

Entity Name: WELLS TERMITE & PEST CONTROL, L.L.C.

Current Principal Place of Business:

5485 LEE ST.
SUITE #4
LEHIGH ACRES, FL 33971

Current Mailing Address:

PO BOX 536
LEHIGH, FL 33970

FEI Number: 65-1009704

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DRIVER, SEAN AMGRM
704 N.W. 33RD AVE
CAPE CORAL, FL 33993 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	MANAGER
Name	DRIVER, SEAN A	Name	DRIVER, JANET MARGARET
Address	704 N.W. 33RD AVE	Address	704 NW 33RD AVE
City-State-Zip:	CAPE CORAL FL 33993	City-State-Zip:	CAPE CORAL FL 33993

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: SEAN DRIVER

MGRM

01/25/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date