

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000001631

**Entity Name:** SUNSHINE RECYCLING SERVICES OF S.W. FLORIDA, L.L.C.

**FILED**  
**Apr 17, 2019**  
**Secretary of State**  
**2276723822CC**

**Current Principal Place of Business:**

5235 RAMSEY WAY  
SUITE 18  
FORT MYERS, FL 33907

**Current Mailing Address:**

5235 RAMSEY WAY  
SUITE 18  
FORT MYERS, FL 33907

**FEI Number: 65-1073042**

**Certificate of Status Desired: No**

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

AMUNDSEN, NICK R  
5235 RAMSEY WAY  
SUITE 18  
FORT MYERS, FL 33907 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 MGR  
Name AMUNDSEN, RORY P  
Address 5235 RAMSEY WAY  
UNIT 18  
City-State-Zip: FORT MYERS FL 33907

Title MGR  
Name AMUNDSEN, NICK R  
Address 5235 RAMSEY WAY  
UNIT 18  
City-State-Zip: FORT MYERS FL 33907

*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: RORY AMUNDSEN**

**PRESIDENT**

**04/17/2019**

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

\_\_\_\_\_  
Date