

**2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000053963

**Entity Name:** A-1 ALL PROFESSIONAL MOVERS, LLC

**Current Principal Place of Business:**

1895 SW 12TH AVE  
OCALA, FL 34471

**Current Mailing Address:**

4570 N ELKCAM BLVD  
BEVERLY HILLS, FL 34465 US

**FEI Number:** 84-1629246

**Certificate of Status Desired:** No

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

A1 ALL PROFESSIONAL MOVERS LLC  
4570 N ELKCAM BLVD  
BEVERLY HILLS, FL 34465 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:** SCOTT CROSSLEY

03/09/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name CROSSLEY, LINDA  
Address 4570 N ELKCAM BLVD  
City-State-Zip: BEVERLY HILLS FL 34465

Title MANAGER  
Name CROSSLEY, SCOTT  
Address 4570 N ELKCAM BLVD  
City-State-Zip: BEVERLY HILLS FL 34465

*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:** SCOTT CROSSLEY

MGR

03/09/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date