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

2016 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000032499

Entity Name: FLORIDA KEYS TREE SERVICE LLC

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

**316 TAVERNIER STREET** TAV ERNIER, FL 33070

### **Current Mailing Address:**

**316 TAVERNIER STREET** TAV ERNIER, FL 33070 US

# FEI Number: 18-8443098

## Name and Address of Current Registered Agent:

LOEB, BERNARD **316 TAVERNIER STREET** TAVERNIER, FL 33070 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

#### Authorized Person(s) Detail :

Title	MGR	Title	AUTHORIZED MEMBER
Name	LOEB, BERNARD	Name	COBURN, JANIS
Address	316 TAVERNIER ST	Address	207 N. OCEAN DRIVE
City-State-Zip:	TAVERNIER FL 33070	City-State-Zip:	KEY LARGO FL 33037

Electronic Signature of Signing Authorized Person(s) Detail

that my name appears above, or on an attachment with all other like empowered.

FILED Feb 03, 2016 Secretary of State CC1521727719

Certificate of Status Desired: No

Date

Date

02/03/2016