I hereby certify that the information indicated on this report or supplemental report is true and accurate			
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: STEPHANIE SHAW	OWNER	02/20/2019	

SIGNATURE: STEPHANIE SHAW

Electronic Signature of Signing Authorized Person(s) Detail

SHAW, CARL G 5308 MT. PLYMOUTH ROAD APOPKA, FL 32712 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:

Title Name Address 5308 MT. PLYMOUTH ROAD Address 5308 MT. PLYMOUTH ROAD City-State-Zip: APOPKA FL 32712 City-State-Zip: APOPKA FL 32712

# **Current Mailing Address:**

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: CRITTER & PEST DEFENSE LIMITED LIABILITY COMPANY

5308 MT. PLYMOUTH ROAD APOPKA, FL 32712 US

DOCUMENT# L07000047814

5308 MT. PLYMOUTH ROAD APOPKA, FL 32712

**Current Principal Place of Business:** 

#### FEI Number: 26-0162437

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

## Author

rized Person(s) Detail :			
	OWNE, MGR	Title	OWNER
	SHAW, CARL	Name	SHAW, STEPHANIE
S	5308 MT. PLYMOUTH ROAD	Address	5308 MT. PLYMOUTH ROAD

OWNER

Date

### FILED Feb 20, 2019 Secretary of State 3524857411CC

Certificate of Status Desired: No

Date