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

SIGNATURE: ENRIQUE ACOSTA

Electronic Signature of Signing Authorized Person(s) Detail

# **Current Mailing Address:** 214 E SUGARLAND CIRCLE

CLEWISTON, FL 33440

## FEI Number: 26-8997202

CLEWISTON, FL 33440

### Name and Address of Current Registered Agent:

ACOSTA, ENRIQUE 214 E SUGARLAND CIRCLE CLEWISTON, FL 33440 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
Name	ACOSTA, ENRIQUE
Address	214 E SUGARLAND CIRCLE
City-State-Zip:	CLEWISTON FL 33440

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

GENERAL MANAGER

Date

04/30/2019 Date

FILED Apr 30, 2019 Secretary of State 8664741397CC

# 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

# DOCUMENT# L08000069222

**Current Principal Place of Business:** 214 E SUGARLAND CIRCLE

Entity Name: FIRST CHOICE PROPERTY MAINTENANCE & SERVICES LLC

Certificate of Status Desired: No