FEI Number: 27-0556478 Name and Address of Current Registered Agent:		Certificate of Status Desired: No		
HERZBERG, JOS 875 GEORGIA A LONGWOOD, FL	VE			
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.				
The above named e	entity submits this statement for the purpose of changing its regist	tered office or regi	stered agent, or both, in the State of Fl	orida.
	entity submits this statement for the purpose of changing its regist JOSEPH HERZBERG	tered office or regi	stered agent, or both, in the State of Fl	orida. 03/06/2018
	, , , , , , , , , , , , , , , , , , , ,	tered office or regi	stered agent, or both, in the State of Fl	
SIGNATURE:	JOSEPH HERZBERG	tered office or regi	stered agent, or both, in the State of Fl	03/06/2018
SIGNATURE: Authorized P	JOSEPH HERZBERG Electronic Signature of Registered Agent	tered office or regi	stered agent, or both, in the State of Fl	03/06/2018

Address

City-State-Zip:

875 GEORGIA AVE

LONGWOOD FL 32750

Current Principal Place of Business: 875 GEORGIA AVE LONGWOOD, FL 32750

Current Mailing Address:

DOCUMENT# L09000053459

875 GEORGIA AVE LONGWOOD, FL 32750

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875 GEORGIA AVE

City-State-Zip: LONGWOOD FL 32750

Entity Name: OUT BACK SCREEN REPAIRS LLC

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Address

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: MICHELLE HERZBERG

03/06/2018

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 06, 2018 Secretary of State CC4688733615

MGR