## 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. 04/15/2020

SIGNATURE: JAMES MCFARLAND

Electronic Signature of Signing Authorized Person(s) Detail

#### Name and Address of Current Registered Agent: MCFARLAND, JAMES DJR 21 MISNERS TRAIL ORMOND BEACH, FL 32174 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: JAMES DJR MCFARLAND

Electronic Signature of Registered Agent

## Authorized Person(s) Detail :

DOCUMENT# L10000019518

21 MISNERS TRAIL

ORMOND BEACH. FL 32174

**Current Mailing Address:** 

FEI Number: 27-1945638

ORMOND BEACH. FL 32174

21 MISNERS TRAIL

**Current Principal Place of Business:** 

Title MGR Name MCFARLAND, JAMES DJR Address 21 MISNERS TRAIL City-State-Zip: ORMOND BEACH FL 32174

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: EXPERT CHEMICAL SALES AND SERVICE LLC

## FILED Apr 15, 2020 Secretary of State 7712181244CC

Certificate of Status Desired: No

04/15/2020

Date

Date

MGR