# that my name appears above, or on an attachment with all other like empowered. 03/11/2017

#### SIGNATURE: JEFFERY NAYLOR

Electronic Signature of Signing Authorized Person(s) Detail

## **Current Mailing Address:** 2447 CEDAR KNOLL DR APOPKA, FL 32712 US

## FEI Number: 32-0341090

### Name and Address of Current Registered Agent:

NAYLOR, JEFF 2447 CEDAR KNOLL DR 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: JEFF NAYLOR

Electronic Signature of Registered Agent

#### Authorized Person(s) Detail :

Title MGR Name NAYLOR, JEFF A Address 2447 CEDAR KNOLL DR City-State-Zip: APOPKA FL 32712

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

MGRM

Certificate of Status Desired: No

FILED Mar 11, 2017 Secretary of State CC9194778113

> 03/11/2017 Date

> > Date

## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L11000052382

## Entity Name: PROPERTY PRESERVATION AND ASSETS PROS "LLC"

# **Current Principal Place of Business:**

2447 CEDAR KNOLL DR APOPKA, FL 32712