

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000085764

**Entity Name:** SPACE COAST RESTORATION LLC

**Current Principal Place of Business:**

3181 SKYWAY CIRCLE  
MELBOURNE, FL 32934

**Current Mailing Address:**

3181 SKYWAY CIRCLE  
MELBOURNE, FL 32934 US

**FEI Number:** 45-2881059

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WELSH, MARJA  
3181 SKYWAY CIRCLE  
MELBOURNE, FL 32934 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

Date

**Authorized Person(s) Detail :**

|                 |                      |                 |                      |
|-----------------|----------------------|-----------------|----------------------|
| Title           | MGRM                 | Title           | MGRM                 |
| Name            | WELSH, PHILLIP       | Name            | WELSH, MARJA         |
| Address         | 580 NEWPORT DR       | Address         | 580 NEWPORT DR       |
| City-State-Zip: | INDIALANTIC FL 32903 | City-State-Zip: | INDIALANTIC FL 32903 |

*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:** PHILLIP WELSH

MBR

02/23/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date