

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000088773

Entity Name: A + AMERICAN EXTERMINATORS LLC

Current Principal Place of Business:

11311 NW 39 STREET
SUNRISE, FL 33323

Current Mailing Address:

P O BOX 268342
WESTON, FL 33326 US

FEI Number: 45-2893489

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LESNIAK, JAMES F
11311 NW 39 STREET
SUNRISE, FL 33323 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 MGR
Name LESNIAK, JAMES F
Address 11311 NW 39 STREET
City-State-Zip: SUNRISE FL 33323

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: JAMES F. LESNIAK

MANAGER

04/06/2018

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date