

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000026983

**FILED**  
**Jan 02, 2019**  
**Secretary of State**  
**CC8805856305**

**Entity Name:** SERVICE CONSTRUCTION LLC

**Current Principal Place of Business:**

357 POST OAK DR  
TALLAHASSEE, FL 32310

**Current Mailing Address:**

357 POST OAK DR  
TALLAHASSEE, FL 32310 US

**FEI Number:** 45-4632431

**Certificate of Status Desired:** No

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

L B K ACCOUNTING SERVICES LLC  
58 SIOUX CIR  
HAVANA, FL 32333 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  
Name LANDAVERDE, MISAEL A  
Address 5552 ELK LN  
City-State-Zip: TALLAHASSEE FL 32304

Title AUTHORIZED MEMBER  
Name LANDAVERDE, CHRISTIAN CARBAJAL  
Address 9387 SHUMARD ROAD  
City-State-Zip: TALLAHASSEE FL 32305

Title AUTHORIZED MEMBER  
Name LANDAVERDE, JONATHAN CARBAJAL  
Address 9387 SHUMARD ROAD  
City-State-Zip: TALLAHASSEE FL 32305

*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:** MISAEL A. LANDAVERDE

**MGRM**

**01/02/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date