I hereby certify that the information indicated on this report or supplemental report is true and accu oath; that I am a managing member or manager of the limited liability company or the receiver or tr		
that my name appears above, or on an attachment with all other like empowered.		
SIGNATURE MICHAEL P DRISCOLI	MGR	03/31/2020

SIGNATURE: MICHAEL P DRISCOLL

I

Electronic Signature of Signing Authorized Person(s) Detail

FEI Number: 83-1936507 Name and Address of Current Registered Agent:

2999 SW PALM BROOK COURT

DOCUMENT# L13000154180

Current Principal Place of Business:

DRISCOLL, MICHAEL P. 2547 SW REILLEY AVE PALM CITY, FL 34990 US

2547 SW REILLEY AVE PALM CITY, FL 34990

Current Mailing Address:

PALM CITY, FL 34990

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: MICHAEL P DRISCOLL

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title MGR JL

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: DRISCOLL INVESTIGATIVE CONSULTANTS LLC

FILED Mar 31, 2020 Secretary of State 0933519538CC

Certificate of Status Desired: No

03/31/2020 Date

Date

THE	MOR
Name	DRISCOLL, MICHAEL PAU
Address	2547 SW REILLEY AVE
City-State-Zip:	PALM CITY FL 34990