

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000160105

Entity Name: ECO-STEAM CARPET CLEANING, LLC**Current Principal Place of Business:**1055 LIZA STREET
SAINT CLOUD, FL 34771**Current Mailing Address:**4417 13TH STREET #313
SAINT CLOUD, FL 34769 US**FEI Number:** 61-1724398**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PITTS, RITA E
4815 DOC DRIVE
SAINT CLOUD, FL 34771 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:** RITA E. PITTS

04/13/2014

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | |
|-----------------|----------------------|
| Title | MGRM |
| Name | TAFT, ADAM M |
| Address | 1055 LIZA STREET |
| City-State-Zip: | SAINT CLOUD FL 34771 |

| | |
|-----------------|----------------------|
| Title | MGRM |
| Name | PITTS, RITA E |
| Address | 4815 DOC DRIVE |
| City-State-Zip: | SAINT CLOUD FL 34711 |

| | |
|-----------------|----------------------|
| Title | MGRM |
| Name | TAFT, SAMANTHA L |
| Address | 1055 LIZA STREET |
| City-State-Zip: | SAINT CLOUD FL 34771 |

| | |
|-----------------|----------------------|
| Title | MGRM |
| Name | PITTS, LEE ROY |
| Address | 4815 DOC DRIVE |
| City-State-Zip: | SAINT CLOUD FL 34771 |

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: RITA E. PITTS

MGRM

04/13/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date