I hereby certify that the information indicated on this report or supplemental report is true and accurate	ate and that my electronic signature shall have t	he 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 tru	istee empowered to execute this report as requi	red by Chapter 605, Florida Statutes; and
that my name appears above, or on an attachment with all other like empowered.		
SIGNATURE: CINDY A SCHUCKERS	MGR	01/15/2015

Electronic Signature of Signing Authorized Person(s) Detail

Current Principal Place of Business: 7955 BABCOCK ST SE

GRANT/VALKARIA, FL 32909

Current Mailing Address:

898 GELASO STREET SW PALM BAY, FL 32908

FEI Number: 59-1346820

Name and Address of Current Registered Agent:

SCHUCKERS, GERALD L 7955 BABCOCK ST SE GRANT/VALKARIA, FL 32909 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

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	SCHUCKERS, GERALD L	Name	SCHUCKERS, CINDY A
Address	7955 BABCOCK ST SE	Address	7955 BABCOCK ST SE
City-State-Zip:	GRANT/VALKARIA FL 32909	City-State-Zip:	GRANT/VALKARIA FL 32909

FILED Jan 15, 2015 Secretary of State CC4070463788

Certificate of Status Desired: No

Date

Date

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: ALL MAINTENANCE & REMODELING OF FLORIDA, LLC

DOCUMENT# L14000027594