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: GARY J. GAMACHE

Electronic Signature of Signing Authorized Person(s) Detail

Name and Address of Current Registered Agent:

BRET JONES, P.A. 700 ALMOND STREET CLERMONT, FL 34711 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 :

Authorized Terson(s) Detail.			
Title	Ρ	Title	VP
Name	GAMACHE, GARY	Name	ROBERTS, MARK
Address	1230 OAKLEY SEAVER DRIVE, SUITE 302	Address	1230 OAKLEY SEAVER DRIVE, SUITE 302
City-State-Zip:	CLERMONT FL 34711	City-State-Zip:	CLERMONT FL 34711

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000036340

Entity Name: AMERICAN BACKFLOW & FIRE SERVICES, LLC

Current Principal Place of Business:

1230 OAKLEY SEAVER DRIVE, SUITE 302 CLERMONT, FL 34711

Current Mailing Address:

P.O. BOX 121722 CLERMONT, FL 34712

FEI Number: 45-4216150

FILED Jan 18, 2017 Secretary of State CC3518484764

Certificate of Status Desired: No

PRESIDENT

01/18/2017 Date

Date