

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000081069

Entity Name: 4 LEAF LAWN CARE LLC

Current Principal Place of Business:

517 PINE ST
AUBURNDALE, FL 33823

Current Mailing Address:

517 PINE ST
AUBURNDALE, FL 33823

FEI Number: 46-5712061

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COLE, NICHOLOS D
517 PINE ST
AUBURNDALE, FL 33823 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 MGR
Name COLE, NICHOLOS D
Address 517 PINE ST
City-State-Zip: AUBURNDALE FL 33823

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: NICHOLOS D COLE

MGR

03/08/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date