

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000106191

Entity Name: MARIA'S MAIDS, LLC.

Current Principal Place of Business:

12220 WHISTLING COURT.
JACKSONVILLE, FL 32226

Current Mailing Address:

12220 WHISTLING COURT.
JACKSONVILLE, FL 32226

FEI Number: 47-1295801

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

AMSTUTZ, MAIRA D
12220 WHISTLING COURT
JACKSONVILLE, FL 32226 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	PRES	Title	VP
Name	AMSTUTZ, MARIA D	Name	JOHNIGEAN, MICHAEL
Address	12220 WHISTLING COURT	Address	12220 WHISTLING COURT.
City-State-Zip:	JACKSONVILLE FL 32226	City-State-Zip:	JACKSONVILLE FL 32226

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: MARIA D AMSTUTZ

PRESIDENT

04/28/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date