# 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

SIGNATURE: DENNIS G ROMANSON

Electronic Signature of Signing Authorized Person(s) Detail

ROMANSON, DENNIS G **5010 AVENUE AVIGNON** LUTZ, FL 33558 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            | ROMANSON, DENNIS G  | Name            | ROMANSON, IRENE C   |
| Address         | 5010 AVENUE AVIGNON | Address         | 5010 AVENUE AVIGNON |
| City-State-Zip: | LUTZ FL 33558       | City-State-Zip: | LUTZ FL 33558       |
|                 |                     |                 |                     |

that my name appears above, or on an attachment with all other like empowered. 01/10/2021 MGR

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L14000194545

Entity Name: ROMANSON PROFESSIONAL SERVICES, LLC

### **Current Principal Place of Business:**

**5010 AVENUE AVIGNON** LUTZ. FL 33558

## **Current Mailing Address:**

**5010 AVENUE AVIGNON** LUTZ. FL 33558 US

# FEI Number: 47-2611336

# Name and Address of Current Registered Agent:

Certificate of Status Desired: No

Date

FILED Jan 10, 2021 Secretary of State 6545885516CC

Date