

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000136511

**FILED**  
**Apr 25, 2018**  
**Secretary of State**  
**CC9886554236**

**Entity Name:** SERVE TO PROTECT LLC

**Current Principal Place of Business:**

1330 MAIN ST  
SUITE # 4  
SARASOTA, FL 34236

**Current Mailing Address:**

PO BOX 1899  
SARASOTA, FL 34230 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LJ ASSOCIATES USA INC  
1660 HUDSON PT DR  
SARASOTA, FL 34236 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	AMBR	Title	AMBR
Name	POLLAK, ALAN	Name	POLLAK, PATRICIA E
Address	1330 MAIN ST SUITE 4	Address	1330 MAIN ST SUITE 4
City-State-Zip:	SARASOTA FL 34236	City-State-Zip:	SARASOTA FL 34236

*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:** ALAN POLLAK

AMBR

04/25/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date