

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000160009

**Entity Name:** ERWIN APPRAISAL SERVICES LLC

**Current Principal Place of Business:**

1205 WILD PALM CT  
ST. AUGUSTINE, FL 32084

**Current Mailing Address:**

1205 WILD PALM CT  
ST. AUGUSTINE, FL 32084

**FEI Number:** 47-5117179

**Certificate of Status Desired:** No

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

ERWIN, GABRIEL A  
1205 WILD PALM CT.  
ST. AUGUSTINE, FL 32084 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:** GABRIEL A. ERWIN

01/17/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ERWIN, GABRIEL A  
Address 1205 WILD PALM CT.  
City-State-Zip: ST. AUGUSTINE FL 32084

Title MGR  
Name ERWIN, SHAWNA L  
Address 1205 WILD PALM CT.  
City-State-Zip: ST. AUGUSTINE FL 32084

*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:** GABRIEL ERWIN

OWNER/PRESIDENT

01/17/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date