

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000118276

Entity Name: MAXON SERVICES, LLC.

Current Principal Place of Business:

1001 SW 1ST PL
CAPE CORAL, FL 33991

Current Mailing Address:

1001 SW 1ST PL
CAPE CORAL, FL 33991 US

FEI Number: 81-3138267

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TURCKES, CHERYL
3107 SW 21ST PL
CAPE CORAL, FL 33914 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: CHERYL TURCKES

04/25/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name MANOK, THOMAS
Address 1001 SW 1ST PL
City-State-Zip: CAPE CORAL FL 33991

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: THOMAS MANOK

MANAGER

04/25/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date